

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Heather N. Hoffman
1715 Sequoia St.
Sandpoint ID 83864

2. Article Number
(Transfer from service label)

7013 2250 0002 0428 4992

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Heather Hoffman

C. Date of Delivery

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☐ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SPokane
UNITED STATES POSTAL SERVICE

07 NOV '18

PM 4 L



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4® in this box •

Idaho Dept of Water Resources
Attn: Darla Block
PO Box 83720
Boise ID 83720-0098

RECEIVED

NOV 09 2018

DEPARTMENT OF
WATER RESOURCES

96-9679

720-0098

