

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:

Tom Mc Garraugh
 217 Cedar St
 PMB 331
 Sandpoint ID
 83864-1410

2. Article Number

(Transfer from service label)

7012 1640 0001 3857 7026

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Joy Batchelor

☒ Agent
☐ Addressee

B. Received by (Printed Name)

Joy Batchelor

C. Date of Delivery

4/23/18

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

RECEIVED

APR 25 2018

3. Service Type

DEPARTMENT OF
WATER RESOURCES☒ Certified Mail[®]☐ Priority Mail Express[™]☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes