

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature <input checked="" type="checkbox"/> <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Address</p> <p>B. Received by (Printed Name) <i>Kimberly Taylor</i> C. Date of Delivery <i>2/24/11</i></p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">MICRON TECHNOLOGY INC DAMARIS FISHER 8000 S FEDERAL WAY PO BOX 6 BOISE ID 83707-0006</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p>	<p>7009 1410 0001 0944 2350</p>

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Tot	

Postmark Here
*Hearing Notice
WRAPP 63 33967
sent 2/22/11*

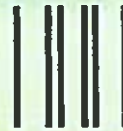
MICRON TECHNOLOGY INC
DAMARIS FISHER
8000 S FEDERAL WAY
PO BOX 6
BOISE ID 83707-0006

PS Form 3800, August 2009

See front of mailpiece for instructions

7009 1410 0001 0944 2350

UNITED STATES POSTAL SERVICE

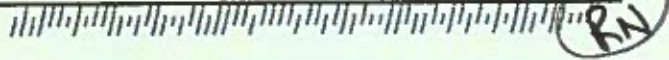


First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

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

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
WESTERN REGIONAL OFFICE
2735 AIRPORT WAY
BOISE, IDAHO 83705

RECEIVED
FEB 27 2017
WATER RESOURCES
WESTERN REGION



U.S. Postal Service
CERTIFIED MAIL RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

7009 1410 0001 0944 2350

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Tot.	

Postmark
Here
Hearing Notice
WRAP 63 33967
Sent 2/22/17

MICRON TECHNOLOGY INC
DAMARIS FISHER
8000 S FEDERAL WAY
PO BOX 6
BOISE ID 83707-0006

Sent
Street
or P.O.
City