

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:

CARL B JORGENSEN
1699 LLOYD RD
BANCROFT ID 83217

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Patricia Jorgensen* ☐ Agent
☐ Addressee
B. Received by (Printed Name) *Patricia Jorgensen* C. Date of Delivery *9-23-13*
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

SEP 30 2013

DEPARTMENT OF
WATER RESOURCES

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes2. Article Number *13-2313* 7012 1640 0001 3856 9397
(Transfer from 99)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

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- Print your name and address on the reverse so that we can return the card to you.
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1. Article Addressed to:

VON N SIMONSON
1827 RICH RD
GRACE ID 83241

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Eric Simonson* ☐ Agent
☐ Addressee
B. Received by (Printed Name) *Eric Simonson* C. Date of Delivery *9-20-13*
D. Is delivery address different from item 1? ☒ Yes
If YES, enter delivery address below: ☐ No

1825 Rich Rd
RECEIVED

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes2. Article *13-2313* 7012 1640 0001 3856 9304
(Transf)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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- Print your name and address on the reverse so that we can return the card to you.
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1. Article Addressed to:

DC HANSEN
3543 S 100 W
BOUNTIFUL UT 84010

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Jane Hansen* ☐ Agent
☐ Addressee
B. Received by (Printed Name) C. Date of Delivery
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

SEP 23 2013

DEPARTMENT OF
WATER RESOURCES

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes2. Article *13-2313* 7012 1640 0001 3856 9335
(Transf)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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- Print your name and address on the reverse so that we can return the card to you.
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1. Article Addressed to:

BART O CHRISTENSEN
1364 ANDERSON RD
GRACE ID 83241

2. Article Number
(Transfer from s)13-2313
7012 1640 0001 3856 9403

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☒ Agent
☐ Addressee

B. Received by (Printed Name)

Cindy Spencer

C. Date of Delivery

9-19-2013

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

SEP 23 2013

DEPARTMENT OF

3. Service Type WATER RESOURCES

☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

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1. Article Addressed to:

JORGENSEN BROTHERS
1928 OLD HWY 30
BANCROFT ID 83217

2. Article Number
(Transfer from s)13-2313
7012 1640 0001 3856 9274

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☒ Addressee

B. Received by (Printed Name)

Meloni's Jorgensen

C. Date of Delivery

9-25-13

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

SEP 27 2013

DEPARTMENT OF
WATER RESOURCES

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

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1. Article Addressed to:

KIMBERLY LLOYD
VP FARMS LLC
1499 MOUNTAIN RD
BANCROFT ID 83217

2. Article Number
(Transfer from s)13-2313
7012 1640 0001 3856 9311

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☒ Addressee

B. Received by (Printed Name)

Kim Lloyd

C. Date of Delivery

9/25/13

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

SEP 27 2013

DEPARTMENT OF

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

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1. Article Addressed to:

STODDARD FARMS OF GRACE
2004 TWO MILE RD
GRACE ID 83241

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Shelby Stoddard* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Shelby Stoddard

C. Date of Delivery

*9-19-13*D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

RECEIVED

SEP 23 2013

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes2. Article Num
(Transfer fr)*13-2313*
7012 1640 0001 3856 9380

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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1. Article Addressed to:

KIM WELCH
1632 CENTRAL RD
BANCROFT ID 83217

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Brody Welch* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Brody Welch

C. Date of Delivery

*9/19/13*D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

RECEIVED

SEP 23 2013

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes2. Article Num
(Transfer fr)*m-2313*
7012 1640 0001 3856 9298

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

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- Print your name and address on the reverse so that we can return the card to you.
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1. Article Addressed to:

TERRY G RINDLISBAKER
1770 JORGENSEN RD
BANCROFT ID 83217

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Ryan R Rindlisbaker* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Ryan R Rindlisbaker

C. Date of Delivery

*9-19-13*D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

RECEIVED

SEP 23 2013

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes2. Article Num
(Transfer fr)*17-2313*
7012 1640 0001 3856 9281

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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:

DATE E YOST
1846 LUND RD
BANCROFT ID 83217

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Camille Yost

C. Date of Delivery

9-19-13

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

RECEIVED

SEP 23 2013

DEPARTMENT OF

3. Service Type WATER RESOURCES

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes2. Article N
(Transfer)

7012 1640 0001 3856 9359

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

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- 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:

RANDALL C BUDGE
RACINE OLSON
PO BOX 1391
POCATELLO ID 83204-1391

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Michael Decker

C. Date of Delivery

9-19-13

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

RECEIVED

SEP 23 2013

3. Service Type DEPARTMENT OF
WATER RESOURCES☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes2. Article
(Transfer)

7012 1640 0001 3856 9366

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

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- 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:

GEM VALLEY FARMS
C/O CHAD NEIBAUR
1550 CENTRAL RD
BANCROFT ID 83217

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Jacki Neibaur

C. Date of Delivery

9-19-13

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

RECEIVED

SEP 23 2013

DEPARTMENT OF

3. Service Type WATER RESOURCES

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes2. Article Numl
(Transfer from)

7012 1640 0001 3856 9342

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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- Print your name and address on the reverse so that we can return the card to you.
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1. Article Addressed to:

ALLEN H BROWNING
CURTIS & BROWNING
482 CONSTITUTION WAY STE 111
IDAHO FALLS ID 83402

13-2313

2. Article No. 7012 1640 0001 3856 9410
(Transfer)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Glenda Anderson*☐ Agent☐ Addressee

B. Received by (Printed Name)

Glenda Anderson

C. Date of Delivery

*9-19-13*D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below:

☐ No

SEP 23 2013

DEPARTMENT OF

3. Service Type WATER RESOURCES

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

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1. Article Addressed to:

A BRUCE LARSEN
ABLE LAW
PO BOX 6369
POCATELLO ID 83205-6369

13-2313

2. Article No. 7012 1640 0001 3856 9328
(Trans)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *A. Bruce Larsen*☐ Agent☒ Addressee

B. Received by (Printed Name)

A. Bruce Larsen

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below:

☐ No

SEP 23 2013

DEPARTMENT OF

3. Service Type WATER RESOURCES

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes