

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:

Ronald and Janiece Bair
3969 W 4100 North
Mackay ID 83251

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Ron Bair*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Ron Bair

C. Date of Delivery

9-13-11

D. Is delivery address different from item 1? ☒ Yes ☐ No

If YES, enter delivery address below:

SEP 14 2012

Department of Water Resources
Eastern Region

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7010 1870 0000 7029 0633

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540