

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:

JOHN W MCFARLAND
39341 OVERLOOK DR
POLSON MT 59850-8117

2. Article Number

(Transfer from service label)

7005 1160 0000 1505 6551

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Jiyun Zhang

☐ Agent☒ Addressee

B. Received by (Printed Name)

Jiyun Zhang

C. Date of Delivery

2-5-04

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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 •

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

DEPARTMENT OF
WATER RESOURCES

FEB 08 2010

RECEIVED