

7099 3220 0006 2265 1426

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

Article Sent To:

Postage \$ 1.22

Certified Fee 2.80

Return Receipt Fee
(Endorsement Required) 2.30Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees \$ 6.32

Postmark
Here

2/19/10

Name (Please Print Clearly) (To be completed by mailer)

RON MAYHEW, KCM ENTERPRISES

Street, Apt. No.; or PO Box No.

2098 W CHAMPAGNE CT

City, State, ZIP+4

EAGLE ID 83616

PS Form 3800, July 1999

See Reverse for Instructions

Certified Mail Provides:

IDWR - WESTERN

- A mailing receipt
- A unique identifier for your mailpiece
- A signature upon delivery
- A record of delivery kept by the Postal Service for two years

Important Reminders:

- Certified Mail may ONLY be combined with First-Class Mail or Priority Mail.
- Certified Mail is not available for any class of international mail.
- NO INSURANCE COVERAGE IS PROVIDED with Certified Mail. For valuables, please consider Insured or Registered Mail.
- For an additional fee, a Return Receipt may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article. **WE CAN** apply postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS postmark on your Certified Mail receipt is required.
- For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "Restricted Delivery".
- If a postmark on the Certified Mail receipt is desired, please present the article at the post office for postmarking. If a postmark on the Certified Mail receipt is not needed, detach and affix label with postage and mail.

IMPORTANT: Save this receipt and present it when making an inquiry.

PS Form 3800, July 1999 (Reverse)

102595-99-M-1938

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:

RON MAYHEW
 KCM ENTERPRISES LP
 2098 W CHAMPAGNE CT
 EAGLE ID 83616

2. Article Number

(Transfer from service label)

7099 3220 0006 2265 1426

PS Form 3811, February 2004

Domestic Return Receipt

65-23097

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Ron Mayhew

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Miriam Mayhew

C. Date of Delivery

2/22/10

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

EAGLE ID 83616

22 FEB 2010 PM 1:17

First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-40

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

RECEIVED

FEB 23 2010

WATER RESOURCES
WESTERN REGION

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

