

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:

Dean Tranmer
City of Pocatello
PO BOX 41129
Pocatello, ID 83205

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Brian Schwan*☐ Agent☐ Addressee

B. Received by (Printed Name)

Brian Schwan

C. Date of Delivery

*7-1-09*D. Is delivery address different from item 1? ☐ YesIf 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

2. Article Number

(Transfer from service label)

7005 1160 0000 1504 4138

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154

UNITED STATES POSTAL SERVICE

01 JUL 2009 PM 1 7



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

RECEIVED

JUL 06 2009

DEPARTMENT OF
WATER RESOURCES

DEPT. OF WATER RESOURCES
322 E. FRONT ST.
P. O. BOX 83720
BOISE, ID 83720-0098

Victoria



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