

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

Article Sent To:

Western Water

RECEIVED

Postage	\$ 1.00
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.90

MAR 24 2009

WATER RESOURCES
WESTERN REGION
Postmark Here

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

MILLEMANN PITTENGER, ET AL

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

PO BOX 1066

City, State, ZIP+4

MC CALL ID 83638

PS Form 3800, July 1999

See Reverse for Instructions

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

Article Sent To:

Postage \$ 1.00

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Return Receipt Fee
(Endorsement Required) 2.20

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees \$ 5.90

RECEIVED

MAR 24 2009

WATER RESOURCES
WESTERN REGION
Postmark Here

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

RON SHURTLEFF, WATER DISTRICT 65

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

102 N MAIN

City, State, ZIP+4

PAYETTE ID 83661

PS Form 3800, July 1999

See Reverse for Instructions

U.S. Postal Service
CERTIFIED MAIL RECEIPT
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Article Sent To:

Postage \$ 1.00

Certified Fee 2.70

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Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees \$ 5.90

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MAR 24 2009

WATER RESOURCES
WESTERN REGION
Postmark Here

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

FLETCHER LAW OFFICE

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

PO BOX 248

City, State, ZIP+4

BURLEY ID 83318

PS Form 3800, July 1999

See Reverse for Instructions

U.S. Postal Service
CERTIFIED MAIL RECEIPT
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Article Sent To:

Postage	\$ 1.00
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Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.90 573

RECEIVED
MAR 24 2009
Postmark
WATER RESOURCES
WESTERN REGION

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

CAPITOL LAW GROUP PLLC

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

PO BOX 32

City, State, ZIP+4

GOODING ID 83330

PS Form 3800, July 1999

See Reverse for Instructions

U.S. Postal Service
CERTIFIED MAIL RECEIPT
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Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.90 573

RECEIVED
MAR 24 2009
Postmark
WATER RESOURCES
WESTERN REGION

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

BLACK CANYON IRRIGATION DISTRICT

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

PO BOX 226

City, State, ZIP+4

NOTUS ID 83656

PS Form 3800, July 1999

See Reverse for Instructions

U.S. Postal Service
CERTIFIED MAIL RECEIPT
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Total Postage & Fees	\$ 5.90 573

RECEIVED
MAR 24 2009
Postmark
WATER RESOURCES
WESTERN REGION

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

BARKER RSHOLT & SIMPSON

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

PO BOX 485

City, State, ZIP+4

TWIN FALLS ID 83303

PS Form 3800, July 1999

See Reverse for Instructions

75007

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:

BLACK CANYON IRR. DISTRICT
PO BOX 226
NOTUS ID 83656

2. Article Number

(Transfer from service label)

7099 3220 0006 2265 1464

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Tina Pennington

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Tina Pennington

C. Date of Delivery

3/24/09

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

If YES, enter delivery address below: ☐ No

RECEIVED

MAR 25 2009

3. Service Type

☒ Certified Mail

☐ Registered

☐ Insured Mail

WATER RESOURCES

WESTERN REGION

☐ Express Mail

☒ Return Receipt for Merchandise

☐ 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 •

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



75007

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:

AMERICAN FALLS RESERVOIR
DISTRICT # 2
CAPITOL LAW GROUP PLLC
ATTN: C THOMAS ARKOOSH
PO BOX 32
GOODING ID 83330

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Kristina Bennett ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Kristina Bennett

C. Date of Delivery

3/24/09

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

RECEIVED

MAR 25 2009

3. Service Type

WATER RESOURCES
WESTERN REGION

- ☒ 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)

7099 3220 0006 2265 1457

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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 •

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



75007

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 SHURTLEFF
WATER DISTRICT #65
102 N MAIN
PAYETTE ID 83661**

COMPLETE THIS SECTION ON DELIVERY

A. Signature  ☐ Agent ☒ Addressee

B. Received by (Printed Name) Jamie White C. Date of Delivery 3-24

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

MAR 25 2009

WATER RESOURCES

3. Service Type **WESTERN REGION**
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number **7099 3220 0006 2265 1488**
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

UNITED STATES POSTAL SERVICE

BOISE ID 837

24 MAR 2009 PM 1 T

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

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

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



75007

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:

MINIDOKA IRRIGATION DISTRICT
FLETCHER LAW OFFICE
ATTN: W KENT FLETCHER
PO BOX 248
BURLEY ID 83318

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Kaley Cook

☒ Agent☐ Addressee

B. Received by (Printed Name)

Kaley Cook

C. Date of Delivery

03.25.09

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

7099 3220 0006 2265 1440

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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 •

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

RECEIVED
MAR 26 2009

WATER RESOURCES
WESTERN REGION



75007

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ 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: BARKER RSHOLT & SIMPSON ATTN: TRAVIS THOMPSON PO BOX 485 TWIN FALLS ID 83303	A. Signature <i>Jessica Nielsen</i> ☒ Agent ☐ Addressee B. Received by (Printed Name) <i>Jessica Nielsen</i> C. Date of Delivery <i>3/25</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☒ No
2. Article Number (Transfer from service label) 7099 3220 0006 2265 1471	3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☒ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

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 •

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

**RECEIVED
MAR 26 2009**

WATER RESOURCES
WESTERN REGION