

U.S. Postal Service™

CERTIFIED MAIL™ RECEIPT

Domestic Mail Only; No Insurance Coverage Provided

For delivery information visit our website at www.usps.com

OFFICIAL USE

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

Postmark
Here

dy

Sent To

Street, Apt.
or PO Box
City, State

PS Form 3849

NORTH KOOTENAI WATER DIST
C/O PETER G SCOTT
GOUGH SHANAHAN JOHNSON
33 SOUTH LAST CHANCE GULCH
HELENA MT 59601

Instructions

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Postmark
Here

dy

Sent To

Street, Apt.
or PO Box
City, State

PS Form 3849

RACHAEL PASCHAL OSBORN
25 WEST MAIN STE 234
SPOKANE WA 99201

Instructions

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City, State

PS Form 3849

RICHARD K EICHSTAEDT
CENTER FOR JUSTICE
35 W MAIN STE 300
SPOKANE WA 99201

Instructions

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:

RACHAEL PASCHAL OSBORN
25 WEST MAIN STE 234
SPOKANE WA 99201

95-9244

2. Article Number

(Transfer from service)

7005 1160 0000 1505 3024

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

15 DEC 2008 PM 1

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

12-23-08

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

R Paschal

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

RICHARD K EICHSTAEDT
CENTER FOR JUSTICE
35 W MAIN STE 300
SPOKANE WA 99201

95-9244

2. Article Number

(Transfer from s)

7005 1160 0000 1505 3031

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

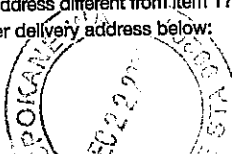
N. Nerny

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

NORTH KOOTENAI WATER DIST

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Lisa Hicks

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

Lisa Hicks

23 Dec 08

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

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:

RACHAEL PASCHAL OSBORN
25 WEST MAIN STE 234
SPOKANE WA 99201

95-9244

2. Article Number

(Transfer from service)

7005 1160 0000 1505 3024

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X 16 DEC 2008 PM 1 ☐ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

12-21-08

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

R Paschal

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
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1. Article Addressed to:

RICHARD K EICHSTAEDT
CENTER FOR JUSTICE
35 W MAIN STE 300
SPOKANE WA 99201

95-9244

2. Article Number

(Transfer from service)

7005 1160 0000 1505 3031

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X M. Keweenaw ☐ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

SENDER: COMPLETE THIS SECTION

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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

NORTH KOOTENAI WATER DIST
C/O PETER G SCOTT
GOUGH SHANAHAN JOHNSON
33 SOUTH LAST CHANCE GULCH
HELENA MT 59601

95-9244

2. Article Number

(Transfer from service)

7005 1160 0000 1505 3048

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Lisa Hicks ☐ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

12-23-08

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

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 •

WA
IDAHO DEPT OF WATER
RESOURCES
ATTN DEBORAH GIBSON
PO BOX 83720
BOISE ID 83720-0098

RECEIVED
DEC 25 2008
DEPARTMENT OF
WATER RESOURCES



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 •

WA
IDAHO DEPT OF WATER
RESOURCES
ATTN DEBORAH GIBSON
PO BOX 83720
BOISE ID 83720-0098

RECEIVED
DEC 29 2008
DEPARTMENT OF
WATER RESOURCES



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RESOURCES
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DEC 29 2008
DEPARTMENT OF
WATER RESOURCES

