

**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: **JS/72-16602**

**ARCHIE SHERWOOD JR  
PO BOX 163  
CLAYTON ID 83227**

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature

**x** *W. Sherwood*

☐ Agent  
☐ Addressee

D. Is delivery address different from item 1?  
If YES, enter delivery address below:

☐ Yes  
☐ No

**JUL 06 2000**  
**RECEIVED**  
**DEPT. OF WATER RESOURCES**  
**SOUTHERN REGION**

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 (Copy from service label)

**7002 0460 0000 7276 5390**

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952