

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
1301 North Orchard Street, P.O. Box 83720
Boise, Idaho 83720-0098

Return Service Requested

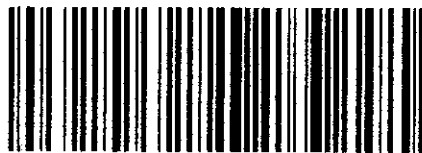
RECEIVED

AUG - 7 2003

Department of Water Resources

65-22359

CERTIFIED MAIL

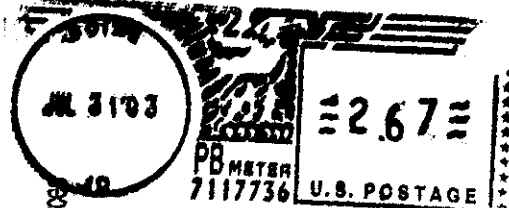


7000 1670 0013 9129 9430

RECEIVED

AUG - 7 2003

Department of Water Resources



*Resent Cert.
letter 8/8/03 -
dj*

8-1-

STEP123 836382008 1103 08 08/02/03
RETURN TO SENDER
STEPHENS SCOTT B
4980 W CAMAS ST APT 12
BOISE ID 83705-5818

RETURN TO SENDER

83638+3178 01



CERTIFIED MAIL

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
1201 North Orchard Street, P.O. Box 83720
Idaho 83720-0098

Return Service Requested

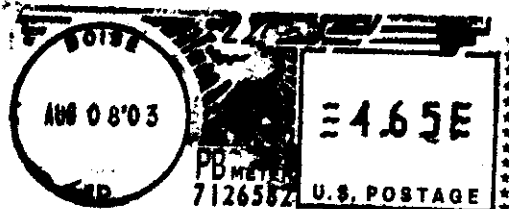
RECEIVED
AUG 14 2003
Department of Water Resources



7000 1670 0013 9129 9287

Fwd

BRUCE STEPHENS
SHERRILL STEPHENS
4980 W CAMAS ST APT 12
BOISE ID 83705-5818

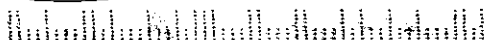


65-22359

STEP980 837052010 1703 08 08/11/03
RETURN TO SENDER
STEPHENS SCOTT B
PO BOX 511
STAR ID 83669-0511
RETURN TO SENDER

Resent 8/15/03
dy

83720-0098



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:

BRUCE STEPHENS
SHERRILL STEPHENS
4980 W CAMAS ST APT 12
BOISE ID 83705-5818

65-22359

2. Article Number (Copy from service label)

7000 1670 0013 9129 9287

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature

X

☐ Agent

☐ Addressee

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 item 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:

BRUCE STEPHENS
SHERRILL STEPHENS
PO BOX 511
STAR ID 83669-0511

65-22359

2. Article Number (Copy from service label)

7000 1670 0013 9129 9249

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Print Clearly) B. Date of Delivery
Scott/Stephens 8/27/03
- C. Signature ☐ Agent ☒ Addressee
x Scott Stephens
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

U.S. Postal Service

CERTIFIED MAIL RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

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

8/8/03

Postmark
Here

dg

Sent To: Bruce Stephens
Street, Apt. No., or PO Box No.: 4980 W Camas St., Apt 12
City, State, ZIP+4: Boise, Id 83705-15818

PS Form 3800, May 2000 See Reverse for Instructions

U.S. Postal Service

CERTIFIED MAIL RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

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

8/15/03

Postmark
Here

dg

Sent To: Bruce Stephens
Street, Apt. No., or PO Box No.: PO Box 511
City, State, ZIP+4: Star Id 83669-0511

PS Form 3800, May 2000 See Reverse for Instructions

UNITED STATES POSTAL SERVICE

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

RECEIVED

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

AUG 4 8 2003

Department of Water Resources

IDAHO DEPT OF WATER
RESOURCES
ATTN DEBORAH GIBSON
1301 N ORCHARD ST
BOISE ID 83706