

**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.

Article Addressed to:

DEL KOHTZ  
IDAHO WATER COMPANY  
1135 VALLEY RD S  
EDEN ID 83325

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 *Delbert Kohtz*  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  
**RECEIVED**  
**APR 11 2013**  
**DEPARTMENT OF WATER RESOURCES**

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

Article Number (Transfer from service label) **7012 1640 0001 3856 7683**

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

**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:

SPF WATER ENGINEERING  
300 E MALLARD DR STE 350  
BOISE ID 83706

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 *M. T. Verdoy*  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  
**RECEIVED**  
**APR 11 2013**  
**DEPARTMENT OF WATER RESOURCES**

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) **7012 1640 0001 3856 7638**

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

**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.

Article Addressed to:

ERICK POWELL  
BROCKWAY ENGINEERING  
2016 N WASHINGTON ST STE 4  
TWIN FALLS ID 83301

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 *Sherie Daniels*  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  
**RECEIVED**  
**APR 11 2013**  
**DEPARTMENT OF WATER RESOURCES**

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

Article Number (Transfer from service label) **7012 1640 0001 3856 7591**

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

**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:

WAYNE SHEPHERD  
DIRECTOR OF PUBLIC WORKS  
CITY OF MOUNTAIN HOME  
PO BOX 10  
MOUNTAIN HOME ID 83647

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 *Sue Monasterio*  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  
**RECEIVED**  
**APR 11 2013**  
**DEPARTMENT OF WATER RESOURCES**

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) **7012 1640 0001 3856 7768**

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

**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.

Article Addressed to:  
  
TIM CONRADS  
75 S PRONGHORN RD  
BOISE ID 83716  
**RECEIVED**  
**APR 12 2013**  
DEPARTMENT OF WATER RESOURCES

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 *Robin Conrads*  Agent  Addressee  
B. Received by (Printed Name) *Robin Conrads* C. Date of Delivery *4/11/13*  
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



Article Number (Transfer from service label) **7012 1640 0001 3856 7676**  
S Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

**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:  
  
INTERMOUNTAIN SEWER AND WATER CORP  
C/O GREG JOHNSON  
1710 S WELLS AVE STE 110  
MERIDIAN ID 83680

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 *K. Acters*  Agent  Addressee  
B. Received by (Printed Name) *K. Acters* C. Date of Delivery *4-10-13*  
D. Is delivery address different from item 1?  Yes  No  
If YES, enter delivery address below:  
**RECEIVED**  
**APR 12 2013**  
DEPARTMENT OF WATER RESOURCES  
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) **7012 1640 0001 3856 7690**  
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

**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.

Article Addressed to:  
  
NORMAN M SEMANKO  
PO BOX 1256  
BOISE ID 83701-1256  
**RECEIVED**  
**APR 12 2013**  
DEPARTMENT OF WATER RESOURCES

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 *Norm Semanko*  Agent  Addressee  
B. Received by (Printed Name) *Norm Semanko* C. Date of Delivery *4-11-13*  
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



Article Number (Transfer from service label) **7012 1640 0001 3856 7669**  
S Form 3811, February 2004 Domestic Return Receipt 102595-02-M-15

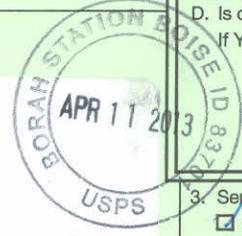
**SENDER: COMPLETE THIS SECTION**

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:  
  
MICHAEL CREAMER  
GIVENS PURSLEY LLP  
PO BOX 2720  
BOISE ID 83701-2720

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 *Savannah Wallace*  Agent  Addressee  
B. Received by (Printed Name) *Savannah Wallace* C. Date of Delivery *4/11/13*  
D. Is delivery address different from item 1?  Yes  No  
If YES, enter delivery address below:  
**RECEIVED**  
**APR 12 2013**  
DEPARTMENT OF WATER RESOURCES  
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) **7012 1640 0001 3856 7584**  
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

**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:

LORI ATKINS  
GENE WILSON  
DARWIN ROY  
602 E MIKE'S PL  
BOISE ID 83716

**RECEIVED**  
APR 12 2013  
DEPARTMENT OF WATER RESOURCES

2. Article Number  
(Transfer from service label) 7012 1640 0001 3856 7744

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
X *Lori Atkins*  Agent  Addressee  
B. Received by (Printed Name) C. Date of Delivery  
LORI ATKINS APR 11 2013

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

**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:

DANA QUINNEY  
SCOTT QUINNEY  
160 S PRONGHORN  
BOISE ID 83716

2. Article Number  
(Transfer from service label) 7012 1640 0001 3856 7652

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
X *Dana Quinney*  Agent  Addressee  
B. Received by (Printed Name) C. Date of Delivery  
DANA QUINNEY APR 12 2013

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

**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 SMITH  
MOORE SMITH  
50 W BANNOCK STE 520  
BOISE ID 83702

2. Article Number  
(Transfer from service label) 7012 1640 0001 3856 7614

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
X *Nicol Tyler*  Agent  Addressee  
B. Received by (Printed Name) C. Date of Delivery  
Nicol Tyler 4/10/13

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

**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:

ED VAN GROUW  
5089 S DEBONAIR LN  
MERIDIAN ID 83642

2. Article Number  
(Transfer from service label) 7012 1640 0001 3856 7751

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
X *Ed Van Grouw*  Agent  Addressee  
B. Received by (Printed Name) C. Date of Delivery  
Ed Van Grouw 4-10

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

**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.

Article Addressed to:

TONYA D BOLSHAW  
PO BOX 16022  
BOISE ID 83715

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
*T Bolshaw*  Agent  Addressee  
B. Received by (Printed Name) *Tonya Bolshaw* C. Date of Delivery *4/12/13*  
D. Is delivery address different from item 1?  Yes  No  
If YES, enter delivery address below:

APR 15 2013  
DEPARTMENT OF WATER RESOURCES

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.  
4. Restricted Delivery? (Extra Fee)  Yes

Article Number (Transfer from service label) 7012 1640 0001 3856 7645

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

**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:

MARY FRISCH  
155 S PRONGHORN DR  
BOISE ID 83716  
RECEIVED  
APR 16 2013  
DEPARTMENT OF WATER RESOURCES

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
*Mary Frisch*  Agent  Addressee  
B. Received by (Printed Name) *Mary Frisch* C. Date of Delivery  
D. Is delivery address different from item 1?  Yes  No  
If YES, enter delivery address below:

APR 15 2013  
OREGON RATE BOISE ID 83715  
USPS

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) 7012 1640 0001 3856 7706

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

**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.

Article Addressed to:

CLEVELAND CORDER LLC  
622 20 E LN  
GARDEN CITY ID 83714  
RECEIVED  
APR 16 2013  
DEPARTMENT OF WATER RESOURCES

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
*Chad Corder*  Agent  Addressee  
B. Received by (Printed Name) *Cleveland Corder* C. Date of Delivery *4-15-13*  
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

Article Number (Transfer from service label) 7012 1640 0001 3856 7621

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

**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:

WENDY TIPPETTS  
999 N SLATER CREEK  
MAYFIELD ID 83716  
RECEIVED  
APR 15 2013  
DEPARTMENT OF WATER RESOURCES

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
*Wendy Tippettts*  Agent  Addressee  
B. Received by (Printed Name) *Wendy Tippettts* C. Date of Delivery *4-12-13*  
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

2. Article Number (Transfer from service label) 7012 1640 0001 3856 7737

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

**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:

DARLA BATEMAN  
404 E INDIAN CREEK RD  
BOISE ID 83716

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 *Darla Bateman*  Agent  Addressee

B. Received by (Printed Name) C. Date of Delivery  
 DARLA BATEMAN 4/16/13

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

RECEIVED  
 APR 19 2013  
 DEPARTMENT OF WATER RESOURCES

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) 7012 1640 0001 3856 7720

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

**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:

GRIFFIN HERREN  
719 DESERT WIND RD  
BOISE ID 83716

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 *Griffin Herren*  Agent  Addressee

B. Received by (Printed Name) C. Date of Delivery  
 Griffin Herren 4-19-2013

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

RECEIVED  
 APR 23 2013  
 DEPARTMENT OF WATER RESOURCES

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) 7012 1640 0001 3856 7713

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

**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:

JOHN K SIMPSON  
BARKER ROSHOLT & SIMPSON LLP  
PO BOX 2139  
BOISE ID 83701-2139

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 *John Simpson*  Agent  Addressee

B. Received by (Printed Name) C. Date of Delivery  
 John Simpson 4/16/13

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

RECEIVED  
 APR 16 2013  
 DEPARTMENT OF WATER RESOURCES

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) 7012 1640 0001 3856 7607

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

**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:

MICHAEL PRESTON  
SHEKINAH INDUSTRIES INC  
420 BITTERROOT DR  
BOISE ID 83709

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 *Mike Preston*  Agent  Addressee

B. Received by (Printed Name) C. Date of Delivery  
 MIKE PRESTON

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

2. Article Number (Transfer from service label) 7012 1640 0001 3856 7577

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