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.	B. Received by Protect Name) C. Dat	Agent Addressee of Delivery 2/-2/) Yes No
Karla Nemth, Director California Department of Water Resources P.O. Box 942836, Room 1115-1 Sacramento, CA 94236-0001	3UL 2020 Service Type Division Express Mail Registered Return Receipt for Mail C.O.D.	ferchandise
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Angela R. George-Moody, Deputy Director LA County Dept. of Public Works Water LA County Flood Division	(1)	No.
Water Resources Division P.O. Box 1460		
Alhambra CA 91802-1460	3 Particle Type Division Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for M ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee)	erchandise Yes
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