TG-180165 03/05/18	Penalty RC-LH
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3.	A. Signature
Print your name and address on the reverse so that we can return the card to you.	X Agent
Attach this card to the back of the mailpiece,	B. Received by (Printed Name) C. Date of Delivery
or on the front if space permits.	Steel Saler 3/7/18
Article Addressed to:	D. Is delivery address different from item 1? Yes
	If YES, enter delivery address below: ☐ No
	1 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
Waste Connections of Washington, Inc.	
9411 NE 94th Avenue	\$ E 2 5
Vancouver WA 98662	9 37
	3. Service Type □ Priority Mail Express® □ Registered Mail™
	☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Delivery ☐ Delivery
9590 9401 0060 5071 6201 89	☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise
Article Number (Transfer from service label)	☐ Collect on Delivery Restricted Derivery ☐ Signature Confirmation ☐ Signature Confirmation ☐ Signature Confirmation
_7015 1730 0000 6005 3123	☐ Insured Mail Restricted Delivery Restricted Delivery (over \$500)
PS Form 3811, April 2015 PSN 7530-02-000-9053	Domestic Return Receipt