TN-180481 06/11/18	Penalty RC-LH
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. 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. 	A. Signature X Agent Addressee B. Received by (Printed Name) Aike Show C. Date of Delivery 6-13-78
Crista Ministries-Senior Community 19303 Freemont Ave. N #84 Shoreline WA 98133	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
9590 9402 3197 7166 7490 51 2. Article Number (<i>Transfer from service label</i>) 7015 1730 0000 6005 3048	3. Service Type
PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt