

TE-200117

Penalty

3/11/20

LC-CN

**SENDER: COMPLETE THIS SECTION**

- 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.

1. Article Addressed to:

ATS Trans, LLC  
 2220 S Tacoma Way  
 Tacoma WA 98409



9590 9402 5064 9092 9983 71

2.   
 71

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee  
*Molly Grant*

B. Received by (Printed Name) *Molly Grant* C. Date of Delivery *3/12/20*

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

**MAR 19 2020**  
**STATE OF WASH.**  
**UTIL. & TRANSP. COMMISSION**

3. Service Type
- Adult Signature
  - Adult Signature Restricted Delivery
  - Certified Mail®
  - Certified Mail Restricted Delivery
  - Priority Mail Express®
  - Registered Mail™
  - Registered Mail Restricted Delivery
  - Return Receipt for Merchandise
  - Signature Confirmation™
  - Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt