

TN-190036 3-22-19

ORDER 01

RC-BJO

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:

WHITE PASS COMMUNITY SERVICE COALITION
 P.O. BOX 789
 MORTON WA 98356



9590 9403 0883 5223 7605 42

2. Article Number (Transfer from service label)

7015 0920 0001 8189 0786

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Handwritten Signature]* Agent
 Addressee

B. Received by (Printed Name)

Douglas H PERKINS

C. Date of Delivery

3/28/19

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

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

RECEIVED
 STATE OF WA
 AND TRAFFIC
 DEPARTMENT
 MORTON WA
 APR - 3 AM 10:00