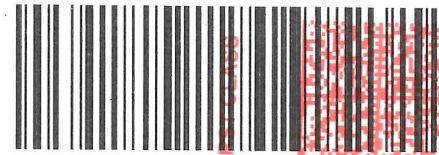




State of Washington
 WASHINGTON UTILITIES &
 TRANSPORTATION COMMISSION
 1300 S. Evergreen Park Dr. S.W., PO Box 47250
 Olympia, WA 98504-7250

CERTIFIED MAIL®



U.S. POSTAGE PITNEY BOWES



ZIP 98501 \$ 006.88⁰
 02 4W
 0000354556 DEC 05 2018

7015 0920 0001 8189 0816

TU-180772

KTS
 unc

Ed's Moving & Storage, Inc.
 PO BOX 39340
 Lakewood, WA 98496

LN
 12-6-18

12-11-18
 12-22-18

2019 JAN -3 AM 8:46
 UTL: MAIL
 STATE OF WASHINGTON

NIXIE 980 DE 1 0000354556
 RETURN TO SENDER
 UNCLAIMED
 UNABLE TO FORWARD
 BC: 985047250
 0000354556

UNC
 0000354556

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

TV-180772

12/5/18

Order 01

RC-BJO

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 Agent
 Addressee
X

B. Received by (*Printed Name*) C. Date of Delivery

1. Article Addressed to:

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

Ed's Moving & Storage, Inc.
 PO BOX 39340
 Lakewood, WA 98496



9590 9402 3786 8032 1864 66

3. Service Type
- | | |
|--|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail | |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) | |

2. Article Number (*Transfer from service label*)
7015 0920 0001 8189 0816

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

Domestic Return Receipt