TG-180951 12-127/18 SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul> ADA-LIN Waste Systems <ul> <li>PO Box 13369</li> <li>Spokane Valley WA 99213</li> </ul>	A. Signature  X
Article Number (Transfer from service label)	3. Service Type  ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation™
7014 2120 0004 6159 688; PS Form 3811, July 2015 PSN 7530-02-000-9053	Desired Mail   All Restricted Delivery