

DE-180203 4/23/19

Letter RC-LH

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:

Ryan Qualls
 P.O. Box 1182
 Maple Valley WA 98038



9590 9402 3786 8032 1852 16

2. Article Number (Transfer from service label)

7014 3490 0001 5403 7329

COMPLETE THIS SECTION ON DELIVERY

A. Signature

R. Saha

- Agent
- Addressee

B. Received by (Printed Name)

R. Saha

C. Date of Delivery

4/25/19

D. Is delivery address different from item 1? If YES, enter delivery address below:

- Yes
- 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
 APR 25 9 AM 8:21
 OF WASH
 STATE