SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3.	A. Signature
Print your name and address on the reverse so that we can return the card to you.	X Agent Addressee
Attach this card to the back of the mailpiece, or on the front if space permits.	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
Johansen Excavating, Inc.	
d/b/a Johansen Construction Company, Ir	nc.
28215 112th St. E.	
Buckley WA 98321	
9590 9402 3786 8032 1865 96	3. Service Type
	☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation™
9T9S 2009 0000 0ELT STO	Aail   ☐ Signature Confirmation   Aail Restricted Delivery   Restricted Delivery   O
PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt