TE-160911 08/06/18	Letter RC-LH
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
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 HONGSHENG ZHAG 8-9
1. Article Addressed to:	D. Is delivery address different from item 1? If YES, enter delivery address below: No
Sino - M International LLC 1205 N 10th Place # 2325	AUG 13 2018
Renton WA 98057	PO BOX 41050
9590 9402 3197 7166 7494 40	3. Service Type PIA WA 98504 ☐ Priority Mail Express® ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Collect on Delivery Sestricted Delivery ☐ Signature Confirmation™
2. Article Number (Transfer from service label)	☐ Insured Mail ☐ Signature Confirmation
7015 1730 0000 6005 4588 <mark></mark>	☐ Insured Mail Restricted Delivery (over \$500) Restricted Delivery
PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt