

TV-180 287

07/10/18

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:

Wise Choice Movers, LLC
 21129 State Route 9
 Woodinville WA 98072



9590 9402 3197 7166 7493 58

2 Article Number (Transfer from service label)

7015 1730 0000 6005 4434

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Shane Wise

- Agent
- Addressee

B. Received by (Printed Name)

Shane Wise

C. Date of Delivery

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

RECEIVED
 JUL 10 8 2018
 PO BOX 41050
 OLYMPIA WA 98504-1050

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