

TE-190932

Penalty

3/20/20

RC-CW

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

- 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.

A. Signature
 X *Penelope C. Light* Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery

RECEIVED
 RECORDS MANAGER

APR 08 2020
 STATE OF WASH.
 UTIL. & TRANSP. COMMISSION

1. Article Addressed to:

Vicky Sandhu
 20120 SE 287th St
 Kent WA 98042



9590 9402 3786 8032 3162 69

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

2. Article Number (Transfer from service label)

7015 1730 0000 6002 6868

USPS TRACKING #



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

9590 9402 3786 8032 3162 69

**United States
Postal Service**

• Sender: Please print your name, address, and ZIP+4® in this box•

State of Washington
WASHINGTON UTILITIES &
TRANSPORTATION COMMISSION
621 Woodland Sq. Loop S.E., PO Box 47250
Lacey, WA 98503