DG-180169 LETTER 4-30	19 RC/PC
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	XX) Jun 24 1 Addressee
so that we can return the card to you.	B Received by (Printed Name) C. Date of Delivery
Attach this card to the back of the mailpiece,	Jordan Sevel 5/2/19
or on the front if space permits.	
1. Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
Rock Placing Co. 14115 E Trent Avenue	
Spokane, WA 99216-1355	222 - 02
9590 9402 3786 8032 1866 57	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Certified Mail Restricted Delivery ☐ Registered Mail Restricted Delivery ☐ Registered Mail Restricted Delivery ☐ Reference Mail Restricted Delivery ☐ Reference Receipt for Merchandise
	Collect on Delivery Restricted Bellvery Signature Confirmation TM
2. Article Number (Transfer from service label)	Included Mail Restricted Delivery
PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt