	T	V-170972	2/7/19		Letter	RC-C	LH
	SEN	DER: COMPLETE THIS:	SECTION		COMPLETE THIS SEC	TION ON DE	LIVERY
	■ C	omplete items 1, 2, and 3.			A. Signature	7	
	Print your name and address on the reverse so that we can return the card to you.				X/		Agent Addressee
		tach this card to the back	-		B. Received by (Printe	d Name)	C. Date of Delivery
	or	on the front if space perm	iits.		Jake	1612	2-11-19
	Article Addressed to:				D. Is delivery address different from item 1? If YES, enter delivery address below:		
		Royal Moving 23009 29th Ave. W Brier WA 98036-83	(. 913		0.7	RECORD 2019 FEB	
	9590 9402 3786 8032 1854 07 2. Article Number (<i>Transfer from service label</i>)] [[[3. Service Type		
		7015 1730 0000 6005 1983			☐ Insured Mail Restricted Del (over \$500)	Restricted Delivery	
	PS F	orm 3811, July 2015 PSN	7530-02-000-9053			Dom	estic Return Receipt