The owner of the last	TC-170 883 11/28/17 SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY A. Signature
23	 Complete items 1, 2, an 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. 	X Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery [-30-]7
	1. Article Addressed to: LOGGED/CASES EMAILED P Beeline Tours Ltd 8110 7th Ave. S.	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
	Seattle WA 98108 9590 9402 1824 6104 1841 86 2. Article Number (Transfer from service label) 7015 0920 0001 8189 0205	3. Service Type
	PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt