TE-170921 10/11/17	Letter RC-LH
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1,\ and 3.Print your name and address on the reverse	A. Signature
so that we can return the card to you. Attach this card to the back of the mailpiece,	B. Received by Printed Name) C. Date of Deliver
or on the front if space permits.	D. Is delivery address different from item 1? Yes
1. Article Addressed to: LOGGEO/CASES	If YES, enter delivery address below: ☐ No
First Student, Inc.	9 1
1128 St. Paul Ave. Tacoma WA 98421	
9590 9403 0883 5223 7602 90	3. Service Type
2. Article Number (Transfer from service label) 7015 0920 0001 8189 094	☐ Insured Mail ☐ Signature Confirmation
PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receip