TV180772 Letter	10-15-18 RC-RS
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 / Agent Addressee B. Received by (Printed Name) C. Date of Delivery
1. Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
Puget Sound Delivery Guys, LLC 218 Main St., STE 153 Kirkland, WA 98033	CT 24 AM ONUMESSION
9590 9402 1824 6104 4275 28	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery ☐ Delivery Restricted Delivery ☐ Delivery Restricted Delivery ☐ Signature Confirmation™
7015 1730 0000 6005 L	Signature Confirmation Restricted Delivery (over \$500)
PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt