State of Washington WASHINGTON UTILITIES & TRANSPORTATION COMMISSION 1300 S. Evergreen Park Dr. S.W., PO Box 4725 Olympia, WA 98504-7250





NIXIE



10-17-19

Thorsen Ventures LLC 2444 Provenance Loop Walla Walla WA 99362

92 DE 1 9 901 205/18

RETURN TO SENDER UNCLAIMED UNABLE TO FORWARD

:: 985 943 7 250

[E-180773

TE 180773 Letter 1 SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON L	-25 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 B. Received by (Printed Name)	☐ Agent ☐ Addressee C. Date of Delivery
Thorse intures LLC 2444 P nance Loop Walla WA 99362	D. Is delivery address different from If YES, enter delivery address b	
9590 9402 3786 8032 1872 27 2. Article Number (Transfer from service label)	□ Adult Signature □ Adult Signature Restricted Delivery □ Certified Mail® □ Certified Mail Restricted Delivery □ Collect on Delivery □ Collect on Delivery Restricted Delivery	□ Priority Mail Express® □ Registered Mail™ □ Registered Mail Restricted □ Delivery □ Return Receipt for Merchandise □ Signature Confirmation™
7015 1730 0000 6005 3598	ured Mail ured Mail Restricted Delivery (500)	☐ Signature Confirmation Restricted Delivery
PS Form 3811, July 2015 PSN 7530-02-000-9053	D	omestic Return Receipt