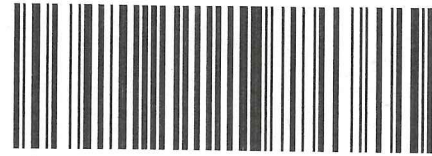




State of Washington
 WASHINGTON UTILITIES &
 TRANSPORTATION COMMISSION
 1300 S. Evergreen Park Dr. S.W., PO Box 4
 Olympia, WA 98504-7250

CERTIFIED MAIL



FIRST CLASS

7015 1730 0000 6005 3475



U.S. POSTAGE PITNEY BOWES



ZIP 98501 \$ 006.67⁰
 02 4W
 0000354556 OCT. 15 2018

TE-180773
 CWS/Board
 RS 12-5
 Posted

1ST NOTICE 10-17
 2ND NOTICE 10/22
 RETURNED 11-1

Athletic Transportation Services, LLC
 PO Box 3246
 Clackamas OR 97015

STATE OF
 UTL. AND
 TRANSPORTATION
 COMMISSION
 2018 NOV 30 AM 9:26
 MANAGEMENT

NIXIE 971 DE 1 01126/18
 RETURN TO SENDER
 UNCLAIMED
 UNABLE TO FORWARD

UNC
 985047250
 970153246 BC
 BC: 985047250 *1526-09950-15-38

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

TE 180773 letter 10-15-18 RC-RS

SENDER: COMPLETE THIS SECTION

- 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.

1. Article Addressed to:

Athletic Transportation Services, LLC
PO Box 3246
Clackamas OR 97015



9590 9402 3786 8032 1871 97

2. Article Number (Transfer from service label)

7015 1730 0000 6005 3475

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt