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. Rock Placing Co. 14115 E Trent Avenue Spokane WA 99216-1355	COMPLETE THIS SECTION ON DELIVERY A. Signature X UNDER M. Marie B. Received by (Printed Name) C. Date of Delivery C. Date of Delivery D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No Received by (Printed Name) D. Is delivery address below: No Received by (Printed Name) D. Is delivery address below: No Received by (Printed Name) D. Is delivery address below: No Received by (Printed Name) Priority Mail Express®
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