SENDER: COMPLETE THIS SECTION	COMPLETE TI:IS SECTION ON DELIVERY A. Signature
 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. 	X Agent ☐ Addressee B. Received by (Printed Name) RECEIVED ☐ Addressee
Sefnco Communications Inc. 3014 N. Flora Rd. Spokane, WA 99216	D. Is defice composition to the last of th
9590 9402 3786 8032 3155 14	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery ☐ ail Restricted Delivery ☐ ail Restricted Delivery ☐ Registered Mail Restricted Delivery ☐ Registered Mail Restricted Delivery ☐ Resurn Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt