TE-190 152 3/28/19	Penalty 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	A. Signature Agent Addressee
so that we can return the card to you.	B. Referred of (Printed Name) C. Date of Delivery
Attach this card to the back of the mailpiece, or on the front if space permits.	July Talatics 4-1-19
1. Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
	380 51
First Student, Inc. 201 NE Park Plaza Driver STE 246	
Vancouver WA 98684	3. Service Type □ Priority Mail Express®
	☐ Adult Signature ☐ Registered Mail™ ☐ Registered Mail Restricted ☐ Registered Mail Restricted
9590 9402 1824 6104 1848 58	Certified Mail® Delivery □ Certified Mail Restricted Delivery □ Collect on Delivery Merchandise
7015 0920 0001 8188 9766	☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation ☐ Signature Confirmation ☐ Signature Confirmation
2072 0450 0003 2	Insured Mail Restricted Delivery (over \$500)
PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt