

USPS TRACKING#



SEATTLE

WA 980

28 OCT '17

PM 6 L

9590 9402 2525 6306 9835 62



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

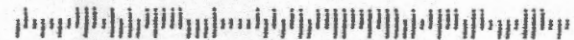
United States
Postal Service

* Sender: Please print your name, address, and ZIP+4® in this box*

Teresa Young
Regional Hearing Clerk
1200 Sixth Ave.
MS: ORC-113
Seattle, WA 98101

TSCA-10-2017-0186

-312399



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.

Mr. Thomas Murray
Mrs. Judith Murray
220 Old Tulalip Road
Marysville, Washington 98271



9590 9402 2525 6306 9835 62

2. Article Number (Transfer from service label)

7016 2710 0000 2872 6818

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Thomas Murray* Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

10/28

1. 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
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery
- Registered Mail Restricted Delivery (over \$500)