

TITANIC

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ 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. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>X </p>
<p>1. Article Address</p> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> <p style="text-align: center;">Geoffrey B. Tichenor Stoel Rives LLP 900 SW Fifth Ave., Suite 2600 Portland, OR 97204</p> </div>	<p>B. Received by (Printed Name) C. Date of Delivery</p> <p style="text-align: center;">RESKLP 11/14</p>
<p>2. Article Number (Transfer from service label)</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input checked="" type="checkbox"/> C.O.D.</p>	<p>4. Restricted Delivery (Extra Fee) <input type="checkbox"/> Yes</p>
<p>7003 1680 0000 5220 1533</p>	