SE	NDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
	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.	A. Received by (Please Print Clearly)  B. Date of Delivery  May   Jansen 555    C. Signature   Addressee    Addressee   Address different from item 12   Yes
1.	Article Addressed to:	Of la delivery address different from item 1? Yes
	Beatriz Shanahan Argent Chemical Laboratories, 8702 152nd Avenue NE	HEARINGS CLERK
	Redmond, WA 98052  Return to Regional Hearing Clerk, ORC-158	3. Service Type Certified Mail Registered Insured Mail C.O.D.
	DOC. # FI FRA-10-2004-0073	4. Restricted Delivery? (Extra Fee)
2. Article Number (Copy from service label) 000 0600 0021 0473 3270		
S	Form 3811, July 1999 Domestic Retu	ırn Receipt 102595-00-M-0952
		COMPLETE THIS SECTION ON DELIVERY
SI	ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
-	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.	A. Received by (Please Print Clearly)  B. Date of Delivery  C. Signature  X Was Eller and Servery  Agent  Addressee  Old political address below:  Who are the print Clearly B. Date of Delivery  Servery  Agent  Addressee  Old political address below:  No
Argent Chemical Laboratories, InchARINGS CLERK 8702 152nd Avenue NE Redmond, WA 98052		
		THEGION TO
	Return to Regional Hearing Clerk, ORC-158	3. Service Type  Certified Mail  Registered Return Receipt for Merchandise  C.O.D.
	Doc. #	4. Restricted Delivery? (Extra Fee) ☐ Yes
2.	Article Number (Copy from service label)	0473 3263
PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952		
2	ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
-	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.	A. Received by (Please Print Clearly)  Mary Hansen  C. Signature  Agent  Addressee
1.		D Is delivery address different from Item 1? Yes  Yes  Yes  No