

SENDER: COMPLETE THIS SECTION

- 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.

Jeffrey Eustis
Aramburu & Eustis, LLP
2710 Third Avenue, Ste. 2112
Seattle, WA 98104-1860

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COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Carol Cohoe* Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
Carol Cohoe *10-27*

D. Is delivery address different from Item 1? Yes
delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
(Transfer from service label)

9505 2970 0000 0880 7464