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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
 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. 	B. Received by (Painted Name) C., Date of	dressee
Attn: James Essig Granite Construction Co 1525 E. Marine View Dri Everett, WA 98201		SOME
9590 9403 0670 5183 5103 08	3. Service Type □ Priority Mail Exp □ Adult Signature □ Registered Mail □ Adult Signature Restricted Delivery □ Registered Mail □ Certified Mail® □ Restricted Delivery □ Return Receipt 1 □ Cofflect on Delivery □ Cofflect on Delivery	Restricted for
Z. A STATE THAT SHALL HOLD SELVICE INDEL	□ Collect on Delivery Restricted Delivery □ Signature Confir □ Signature Confir Restricted Delivery	mation
PS Form 3811, April 2015 PSN 7530-02-000-9053	Domestic Return I	Receipt