

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.

1. Article Addressed to:

**Steven Andrews
Plant Manager
PEXCO, LLC
3110 - 70th Ave. E.
Fife, WA 98424**

2. Article Number
(Transfer from service label)

7014 1200 0001 4320 8315

PS Form 3811, July 2013

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
A Gillette Addressee

B. Received by (Printed Name) C. Date of Delivery
A GILLETTE *3/30/15*

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

Domestic Return Receipt