

**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:

**Todd Maybrown, Esq.  
Allen, Hansen & Maybrown, P.S.  
One Union Square  
600 University St., Ste. 3020  
Seattle, WA 98101**

2. Article Number  
(Transfer from service label)

7013 1710 0002 3980 3175

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
*Sarah Conger*  Addressee

B. Received by (Printed Name) C. Date of Delivery  
*S. Conger*

D. Is delivery address different from item 1?  Yes  
If YES, enter 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