

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:

JANIE MORGAN
 TRUSTEE, JANIE MORGAN
 LIVING TRUST
 P.O. BOX 26
 NORTH LAKEWOOD, WA 98259

2. Article Number

(Transfer from service label)

7012 0470 0001 0017 0763

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X


 Agent Addressee

B. Received by (Printed Name)

Janie Morgan

C. Date of Delivery

5/4/23

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

3. Service Type

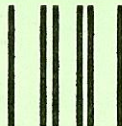
 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

 Yes

UNITED STATES POSTAL SERVICE
SEATTLE WA 980

4 MAY 2023 PM 4 L



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

- Sender: Please print your name, address, and ZIP+4 in this box •

SNOHOMISH COUNTY COUNCIL
ATTN: ELENA LAO
3000 ROCKEFELLER AVE M/S 609
EVERETT, WA 98201

SNOHOMISH COUNTY COUNCIL
ELECTRONIC COPY RECEIVED

DATE: 5/08/23 Time 12:20 p.m.

