

SENDER: COMPLETE THIS SECTION

- 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.

1. Article Addressed to:

Michael Hosale
2604 N. Lake Dr.
Milwaukee WI 53211



9500 0400 2238 7196 5928 14

2. Article No. 70

PS Form 3

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Michael Hosale*

Agent
 Addressee

B. Received by (Printed Name)

Mike Hosale

C. Date of Delivery

6/29/19

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

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery

- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation
- Signature Confirmation Restricted Delivery

Receipt