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. 1. Article Addressed to: Dovid Kos Cielviak	A. Signature B. Received by (Printed Name) DEVIN KOSCIEL D. Is delivery address different from If YES, enter delivery address in	Agent Addresse C. Date of Deliver
Milw WI SZZZ	-	
9590 9402 3238 7196 5943 37	3. Service Type Adult Signature Adult Signature Restricted Delivery Certified Mail® Certified Mail Restricted Delivery Collect on Delivery	□ Priority Mail Express® □ Registered Mail™ □ Registered Mail Restricte □ Priority Mail Restricte □ Priority Mail Restricte □ Priority Mail Restricte □ Signature Confirmation™