

SENDER: COMPLETE THIS SECTION

190094

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:

Salestine Sivibthi
 1002 E. Michigan Ave
 Old Cuts W 53454



2. Article Number (Transfer from www.usps.com)

7018 2290 0000 6497 6238

PS Form 3811, July 2015 PSN 7530-02-000-9053

A. Signature

X
 [Handwritten Signature]

□ Agent

B. Received by (Printed Name)

□ Addressee

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

Yes
 No

C. Date of Delivery
 8/17/19

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Delivery Restricted Delivery
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery
- Priority Mail Express®
- Registered Mail™

Domestic Return Receipt