

251021
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:

Patrick Wesley
205 W Highland #303
Milw WI 53203



9590 9402 6805 1074 6947 96

7021 0950 0002 1564 4721

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Patrick Wesley*

Agent

Addressee

B. Received by (Printed Name)

Patrick Wesley

C. Date of Delivery

10-14

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
- Collect on Delivery

- Delivery Restricted Delivery
- Insured Mail Restricted Delivery
(over \$500)

- Priority Mail Express®
- Registered Mail®
- Registered Mail Restricted Delivery
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt