


251231

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete Items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p style="font-size: 1.2em; font-family: cursive;">F STREET BTC & LLC 1134 N 92 ST #200 Milw WI 53233</p> <div style="text-align: center;">  9590 9402 6805 1074 6949 49 </div>	<p>A. Signature</p> <p style="font-size: 1.5em; font-weight: bold;">X</p> <div style="text-align: right;"> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee </div> <p>B. Received by (Printed Name)</p> <p>C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>	
<p>2. ZIP+4®</p> <p style="font-size: 1.2em; font-family: cursive;">7021 0950 0002 1564 4837</p>	<p>3. Service Type</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery </div> <div style="width: 45%;"> <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery </div> </div> <p style="text-align: right;"> <input type="checkbox"/> Delivery Restricted Delivery <input type="checkbox"/> Restricted Delivery (over \$500) </p>	

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