1 24	AT TOP OF ENVELOPE TO THE RIGHT  WAY TO BE SELECTED AT DOTHER HIGH	PLACE STICKER
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON	DELIVERY
<ul> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the malipiece, or on the front if space permits.</li> </ul>	A. Signature  X	☐ Agent ☐ Addressee C. Date of Delivery
1. Article Addressed to:  Mark Better  MPS  124 N 117 St  Lilw W 53233	D. Is delivery address different fro If YES, enter delivery address	
9590 9402 7811 2152 2359 39  2. Article Number (Transfer from 7021, 2720 0000 2293 094)	3. Service Type  ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Delivery Restricted Delivery i III ☐ III ☐ III Restricted Delivery (over \$500)	□ Priority Mall Express® □ Registered Mall™ □ Registered Mall Restricted Delivery □ Signature Confirmation™ □ Signature Confirmation Restricted Delivery
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt ;