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: Cuth Johnson	B. Received by (**Rinted Name**) C. Date of Delivery Line 1.2 D. Is delivery address different from item 1? Yes If YES, enter delivery address below: Adult Signature Adult Signature Restricted Delivery Certified Mail® Certified Mail® Certified Mail Restricted Delivery Collect on Delivery Collect on Delivery Collect on Delivery Restricted Delivery Signature Confirmation Signature Confirmation Restricted Delivery Restricted Delivery Restricted Delivery
PS Form 3811, July 2015 PSN 7530-02-000-9053 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,	Domestic Return Receipt Glozz COMPLETE THIS SECTION ON DELIVERY A. Signature A. Agent Addresse B. Received by (Printed Name) C. Date of Delivery
or on the front if space permits. 1. Article Addressed to: Susan La Budde 2581 V. Terrace Ave Link Wl 5321 9590 9402 4964 9063 4844 25	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type ☐ Adult Signature Gestricted Delivery ☐ Registered Mail™ ☐ Registered Mail ☐ Registered Mail Restrict Delivery
2. Article Number (Transfer from service label) 7018 2290 0000 6497 69 PS Form 3811, July 2015 PSN 7530-02-000-9053	☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Il Restricted Delivery ☐ Delivery Restricted Delivery ☐ Delivery ☐ Delivery ☐ Domestic Return Receipt

191022

A. Signature

SENDER: COMPLETE THIS SECTION

■ Print your name and address on the reverse so that we can return the card to you.

Complete items 1, 2, and 3.

COMPLETE THIS SECTION ON DELIVERY

Agent

Addressee