240423		
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON D	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 maliplece, or on the front if space permits.</li> </ul>	A. Signature  A. Signature  A. Signature  A. Signature  A. Signature  A. Signature	7 Agent 800 Addressee C. Date of Delivery
1. Article Addressed to:  Laura Sue Mosius  3209 W Wells St  Milw W1 53208	D. Is delivery address different from     if YES, enter delivery address b	
9590 9402 7749 2152 0933 35  2. Article Number (Transfer from service label) 7021 2720 0000 2293 0726	□ Adult Signature □ Adult Signature Restricted Delivery □ Gertified Mail® □ Certified Mail® □ Collect on Delivery □ Collect on Delivery □ Collect on Delivery Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
DS Form 3811 July 2020 DSN 7520 02 000 0052		

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Domestic Return Receipt