{- -241573 COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. 🖵 Agent Print your name and address on the reverse ana 1mh Addressee so that we can return the card to you. C. Date of Delivery B. Rec ived by (Printed Name) Attach this card to the back of the mailpiece, ANN JACOBS 28 or on the front if space permits. С 1. Article Addressed to: D. Is delivery address different from tem 12 C Yes If YES, enter delivery address below: No No finn Jacoks 2721 N Later De Milw WI 53211 3. Service Type Adult Signature Adult Signature Restricted Delivery Certified Mail® Certified Mail Restricted Delivery Certified Mail C Priority Mall Express® Registered Mail<sup>TM</sup>
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Domestic Return Receipt