

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, or on the front if space permits.

1. Schiro & Zarzynski
FN 180483
On Behalf of Stephan Thomas
111 E. Wisconsin Avenue, Suite 1925
Milwaukee, WI 53202-4825



9590 9402 3170 7166 3105 13

2. Article Number (Transfer from service label)

7012 3460 0000 0488 1035

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
X Traci Jean King Addressee

B. Received by (Printed Name) C. Date of Delivery
Traci Jean King *8/06/2018*

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Insured Mail
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

Domestic Return Receipt