


| SENDER: COMPLETE THIS SECTION  | COMPLETE THIS SECTION ON DELIVERY  |
|--|--|
| <ul style="list-style-type: none"> <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 mailpiece, or on the front if space permits.</li> </ul> | <p>A. Signature<br/> <input checked="" type="checkbox"/> <i>Tom Proffitt</i> <input type="checkbox"/> Agent<br/> <input type="checkbox"/> Addressee</p>  |
| <p>1. Article Addressed to:<br/> <i>Tom Proffitt</i><br/> <i>W152 N 6932 Westwood Dr</i><br/> <i>Menomonie Falls WI 53057</i></p>  | <p>B. Received by (Printed Name) _____ C. Date of Delivery <i>15-10-19</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes<br/> If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>   |
| <br>9590 9402 3238 7196 5935 45  | <p>3. Service Type</p> <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®<br><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™<br><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery<br><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise<br><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™<br><input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <p>2. Article Number (Transfer from service label)<br/> 7018 2290 0000 6504 2369</p>   | <input type="checkbox"/> Signature Confirmation Restricted Delivery (over \$500)   |

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

Domestic Return Receipt

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| <ul style="list-style-type: none"> <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 mailpiece, or on the front if space permits.</li> </ul> | <p>A. Signature<br/> <input checked="" type="checkbox"/> <i>REV David W Totsky</i> <input type="checkbox"/> Agent<br/> <input type="checkbox"/> Addressee</p>   |
| <p>1. Article Addressed to:<br/> <i>Tom Proffitt</i><br/> <i>Sturmer Park Luth. Ch.</i><br/> <i>2703 N. Sturmer Blvd.</i><br/> <i>Milwaukee WI 53210</i></p>   | <p>B. Received by (Printed Name) <i>REV. DAVID W TOSKY</i> C. Date of Delivery <i>15-10-19</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes<br/> If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>  |
| <br>9590 9402 3238 7196 5935 69  | <p>3. Service Type</p> <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®<br><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™<br><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery<br><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise<br><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™<br><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <p>2. Article Number (Transfer from service label)<br/> 7018 2290 0000 6504 2352</p>   | <input type="checkbox"/> Signature Confirmation Restricted Delivery (over \$500)  |

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Domestic Return Receipt