	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
	■ Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.  ■ 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 malipiece, or on the front if space permits.  1. Article Addressed to:    Wicoh   Kauss/Christyka   Welmada     Calumda   Cal	A. Signature  X	/ery
,	Milw N 53202	☐ Registered ☐ Return Receipt for Merchand ☐ Insured Mall ☐ C.O.D.	ilse
		4. Restricted Delivery? (Extra Fee) ☐ Yes	
	7019 2280 0001 7548 976	30 /11/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/	