SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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. Article Addressed to: James Peret 3006 Nagawicka Avenue 	A. Signature Agent Addressee B. Beceived by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
Delafield WI 53018	Jim Pord
9590 9402 6952 1104 5668 47 2. Article Number (Transfer from service label) 7021 0350 0000 5304 8602	3. Service Type □ Adult Signature □ Adult Signature Restricted Delivery □ Certified Mail® □ Collect on Delivery □ Collect on Delivery Restricted Delivery □ Insured Mail Restricted Delivery □ Insured Mail Restricted Delivery □ cover \$500)
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

\$ V

COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature ☐ Agent Complete items 1, 2, and 3. ☐ Addressee Print your name and address on the reverse C. Date of Delivery so that we can return the card to you. B. Received by (Printed Name) Attach this card to the back of the mailpiece, or on the front if space permits. If YES, enter delivery address below: 1. Article Addressed to: William & Linda Kirchen 521 N 92nd Street Milwaukee WI 53226 □ Priority Mail Express® □ Registered Mail™ □ Registered Mail Restricted Delivery □ Signature Confirmation™ □ Signature Confirmation Restricted Delivery 3. Service Type Adult Signature Adult Signature Restricted Delivery Certified Mail® Certified Mail® Collect on Delivery Collect On Delivery Collect Adult 3. Service Type 9590 9402 6924 1104 5424 59 2. Article Number (Transfer from service label) Insured Mail Insured Mail Restricted Delivery (over \$500) 7,021, 0350, 0000 5304 8596 Domestic Return Receipt PS Form 3811, July 2020 PSN 7530-02-000-9053