SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul> <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>	A. Signature  X John Sharch  B. Received by (Printed Name)  IVAN STRMECKT	☐ Agent ☐ Addressee C. Date of Delivery MARCH 12, 2019
Sacred Heart Catholic church 917 North 49 <sup>th</sup> Street Milwaukee, WI 53208	D. Is delivery address different from If YES, enter delivery address b	item 1?  Yes
7010-2290 0000 6497 513	☐ Adult Signature Restricted Delivery ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail® ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery	Priority Mail Express®  Registered Mail™ Registered Mail Restricted Delivery Return Receipt for Merchandise  Signature Confirmation™ Signature Confirmation Restricted Delivery