/	91022
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  A Agent  ☐ Addressee  B. Received by (Printed Name)  C. Date of Delivery
1. Article Addressed to: Susan La Budde 2581 N Terrare tre	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
Mile W1 53211	
9590 9402 4964 9063 4844 32	3. Service Type  □ Adult Signature □ Adult Signature Restricted Delivery □ Certified Mail® □ Certified Mail® □ Certified Mail Restricted Delivery □ Collect on Delivery □ Collect On Delivery
2 7018 2290 0000 6497 65	☐ Collect on Delivery ☐ Signature Confirmation™ ☐ Signature Confirmation ☐ Signature Confirmation ☐ Restricted Delivery ☐ (over \$500)
PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt