


SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p style="margin-left: 20px;">Mike Oates</p> <p style="margin-left: 20px;">333 E Chicago St</p> <p style="margin-left: 20px;">Milwaukee WI 53202</p> <div style="text-align: center; margin-top: 10px;">  <p>9590 9402 4964 9063 4825 68</p> </div> <p>2. Article Number</p> <p style="margin-left: 20px;">7018 2290 0000 6497 7358</p>	<div style="text-align: right; margin-bottom: 5px;">191847      191862</div> <p>A. Signature</p> <p style="margin-left: 20px;"><i>[Signature]</i> <input type="checkbox"/> Agent</p> <p style="margin-left: 20px;"><input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)</p> <p style="margin-left: 20px;">Vicki Green</p> <p>C. Date of Delivery</p> <p style="margin-left: 20px;">3/13/76</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes</p> <p style="margin-left: 20px;">If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p> <div style="margin-top: 10px;"> <p>3. Service Type</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> Adult Signature  <input type="checkbox"/> Adult Signature Restricted Delivery  <input checked="" type="checkbox"/> Certified Mail®  <input type="checkbox"/> Certified Mail Restricted Delivery  <input type="checkbox"/> Collect on Delivery </div> <div style="width: 45%;"> <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Signature Confirmation Restricted Delivery </div> </div> <div style="margin-top: 5px;"> <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) </div> </div>

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

Domestic Return Receipt