	759207
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> <li>Article Addressed to:         <ul> <li>Daryl L. Ohland</li> <li>NTWR Consulting</li> <li>1382 Whippletree Lane</li> <li>Neenah, WI 54956</li> </ul> </li> </ul>	A. Signature    Agent   Addressee     B. Received by (Printed Name)   C. Date of Delivery     Durand   Durand   C. Date of Delivery     D. Is delivery address different from item 1?   Yes     If YES, enter delivery address below:   No
9590 9402 6953 1104 8621 77  2. Article Number (Transfer from service label)  7020 3140 0001 1544 0992	3. Service Type  □ Adult Signature □ Adult Signature Restricted Delivery □ Certified Mail® □ Certified Mail Restricted Delivery □ Collect on Delivery □ Collect on Delivery Restricted Delivery □ Insured Mail red Mail Restricted Delivery r \$500) □ Priority Mail Express® □ Registered Mail T <sup>M</sup> □ Registered Mail Restricted Delivery □ Signature Confirmation □ Restricted Delivery r \$500)

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt