

SENDER: COMPLETE THIS SECTION

- 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:

Vincent J. Falcone
von Briesen & Roper S.C.
10 E Doty St #900
Madison, WI 53703



9590 9402 8253 3094 0286 19

2. Article Number (Transfer from service label)

9589 0710 5270 0160 4769 88

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Laura Ernst

☐ Agent
☐ Addressee

B. Received by (Printed Name)

Laura Ernst

C. Date of Delivery

4/21/25

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Mail
- ☐ Mail Restricted Delivery (over \$500)

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

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

Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee

\$

7.85

Extra Services & Fees (check box, add fees as appropriate)

- ☐ Return Receipt (hardcopy) \$
- ☐ Return Receipt (electronic) \$
- ☐ Certified Mail Restricted Delivery \$
- ☐ Adult Signature Required \$
- ☐ Adult Signature Restricted Delivery \$

Postage

\$

1.69

Total Postage

\$

9.64

Sent To

Vincent J. Falcone

Street and

von Briesen & Roper S.C.

City, State

10 E Doty St #900

Madison, WI 53703

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

Instructions