

75952 T

**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:**

Daryl L. Ohland  
 NTWR Consulting  
 1382 Whippetree Lane  
 Neenah, WI 54956



9590 9402 6953 1104 8622 38

**2. Article Number (Transfer from service label)**

7020 3160 0001 1546 0923

**COMPLETE THIS SECTION ON DELIVERY**

**A. Signature**

**X**

- Agent
- Addressee

**B. Received by (Printed Name)**

Ohland

**C. Date of Delivery**

4/1-23

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

**3. Service Type**

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Registered Mail™
- Registered Mail Restricted Delivery
- Signature Confirmation™
- Signature Confirmation Restricted Delivery
- Priority Mail Express®
- Registered Mail™
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

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

Domestic Return Receipt