

59425 2/2

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:

Bret Clostermery
 Cash for Your Customers LLC
 4502 Helgesen Dr
 Madison, WI 53718



9590 9402 5650 9308 9736 36

2. Article Number (Transfer from service label)

7017 2680 0000 9822 8150

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *M.S. [Signature]*

- Agent
- Addressee

B. Received by (Printed Name)

C-19

C. Date of Delivery

4-3-20

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
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

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

59425 2/2

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

OFFICIAL USE

7017 2680 0000 9822 8150

Certified Mail Fee \$ *3.55*

- Extra Services & Fees (check box, add fees as appropriate)
- Return Receipt (hardcopy) \$ *2.87*
 - Return Receipt (electronic) \$ _____
 - Certified Mail Restricted Delivery \$ _____
 - Adult Signature Required \$ _____
 - Adult Signature Restricted Delivery \$ _____

Postage \$ *2.50*

Total Price \$ *6.90*

Sent To
 Street a
 City, St

Bret Clostermery
 Cash for Your Customers LLC
 4502 Helgesen Dr
 Madison, WI 53718

Postmark Here

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

Domestic Return Receipt