

75879 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:**

Don M. Millis  
 Reinhart Boerner Van Deuren S.C.  
 PO Box 2018  
 Madison, WI 53701-2018



9590 9402 6953 1104 8619 96

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

7020 3160 0001 1545 9309

**COMPLETE THIS SECTION ON DELIVERY**

**A. Signature**

X *James Millis*

- Agent
- Addressee

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

*James Millis*

**C. Date of Delivery**

*3 Apr 23*

**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
- Signature Confirmation™
- Signature Confirmation Restricted Delivery