		75821 -
	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
	 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. 	A. Signature X Agent B. Received by (Printed Name) C. Date of Delivery 4-3
	1. Article Addressed to: Alan Marcuvitz Joseph J. Rolling von Briesen & Roper, s. c. 10 East Doty, Suite 900	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
	9590 9402 6953 1104 8618 04 2. Article Number (<i>Transfer fróm service label</i>)	3. Service Type
-	PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt