

75725 +

**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:**

Alan Marcuvitz  
 Joseph J. Rolling  
 von Briesen & Roper, s. c.  
 10 East Doty, Suite 900  
 Madison, WI 53703



9590 9402 6953 1104 8617 43

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

7020 3160 0001 1545 9668

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

**COMPLETE THIS SECTION ON DELIVERY**

**A. Signature**  
 *John M. Deane*  Agent  
 Addressee

**B. Received by (Printed Name)** *John Deane*  **C. Date of Delivery** *4-3*

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

Registered Mail Restricted Delivery (over \$500)

Domestic Return Receipt