PS Form 3811, February 2004 Domestic Return Receipt					102505-02-44-15
2. Article Number (Transfer from service label)	0250 7007	0000	2275	1427	
		4. Restric	ted Deliver	y? (Extra Fee)	D Yes
08-927-TR-CVI	🗖 Reç	uiled iveal istered ired Mail	· ·	Receipt for Merchandise	
MILWAUKEE WI 5320	7	3. Service	e Type tified Mell	C Express	L deil
1040 E. POTTER AVE.		-			
JESSICA AND MARK 7	RUCKING LL	C.			
		If YES,	, enter deliv	rery aderess b	elo® .⊡No Selo® . ≺
1. Article Addressed to:			different from		
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailplece, or on the front if space permits.</li> </ul>		B. Receiv	ed by the	nted Name)	C. Date of Delivery
		A. Signati X	P	rin	Agent
SENDER: COMPLETE THIS SECTION		COMPLETE THE SECTION SERVICES			
	¢.			<u></u>	2

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