

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:

James Peontke
P.O. Box 2100
Woodruff, WI 54568



9590 9402 3506 7275 0627 48

2. Article Number (Transfer from service label)

7018 0360 0001 7499 7837

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent

Addressee

B. Received by (Printed Name)

Jim Peontke

C. Date of Delivery

7-7-21

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

Mail Restricted Delivery (500)

Priority Mail Express®

Registered Mail™

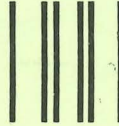
Registered Mail Restricted Delivery

Return Receipt for Merchandise

Signature Confirmation™

Signature Confirmation Restricted Delivery

USPS TRACKING#



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

9590 9402 3506 7275 0627 48

United States
Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box•

W DNR
ATTN: Carrie Stoltz
107 Sutliff Avenue
Rhinelander, WI 54501

