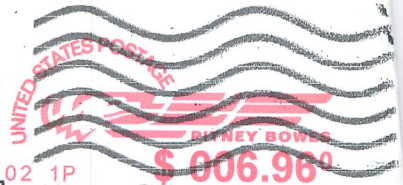
State of Wisconsin
DEPARTMENT OF NATURAL RESOURCES
Plymouth Service Center
1155 Pilgrim Road
Plymouth, WI 53073

CERTIFIED MAIL

7016 3560 0000 8882 6262



First Notice _____
Second Notice _____
Returned _____

Not
8-5
ay
8/10

Mr. Daniel Parker
205 Linwood Terrace
West Bend, WI 53095

SUBJECT: Third and Final Request for

UNC

NIXIE 530 DE 1 0008/22/21
RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD
BC: 53073429455 *0425-03022-22-19

State of Wisconsin
DEPARTMENT OF NATURAL RESOURCES
Plymouth Service Center
1155 Pilgrim Road
Plymouth, WI 53073

CERTIFIED MAIL

7016 3560 0000 8882 6279

First Notice _____
Second Notice _____
Returned _____

Not
8-5
ay
8/10

Mr. Walter Jarowsky Jr.
210 Linwood Terrace
West Bend, WI 53095

SUBJECT: Third and Final Request for

UNC

NIXIE 530 DE 1 0008/22/21
RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD
BC: 53073429455 *2025-04712-03-45

CERTIFIED MAIL®

OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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:

Jasowsky
210 Linwood Terrace
West Bend, WI 53095

9590 9402 2582 6336 6516 89

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

7016 3560 0000 8882 6279

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X ☐ Agent ☐ Addressee

B. Received by *(Printed Name)* | C. Date of Delivery

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
- ☒ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

CERTIFIED MAIL®

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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:

Parker
205 Linwood Terrace
West Bend, WI 53095

9590 9402 2582 6336 6516 58

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

7016 3560 0000 8882 6262

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X ☐ Agent ☐ Addressee

B. Received by *(Printed Name)* | C. Date of Delivery

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
- ☒ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt