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:

Jaakola Trust
ATTN: Billie Jaakola + Douglas Pavlik
209 North Avenue West
Ladysmith, WI 54848

9590 9402 4917 9032 5347 71

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

7018 1130 0000 5431 0594

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Douglas E Pavlik ☐ Agent ☐ Addressee

B. Received by *(Printed Name)*: Douglas E Pavlik

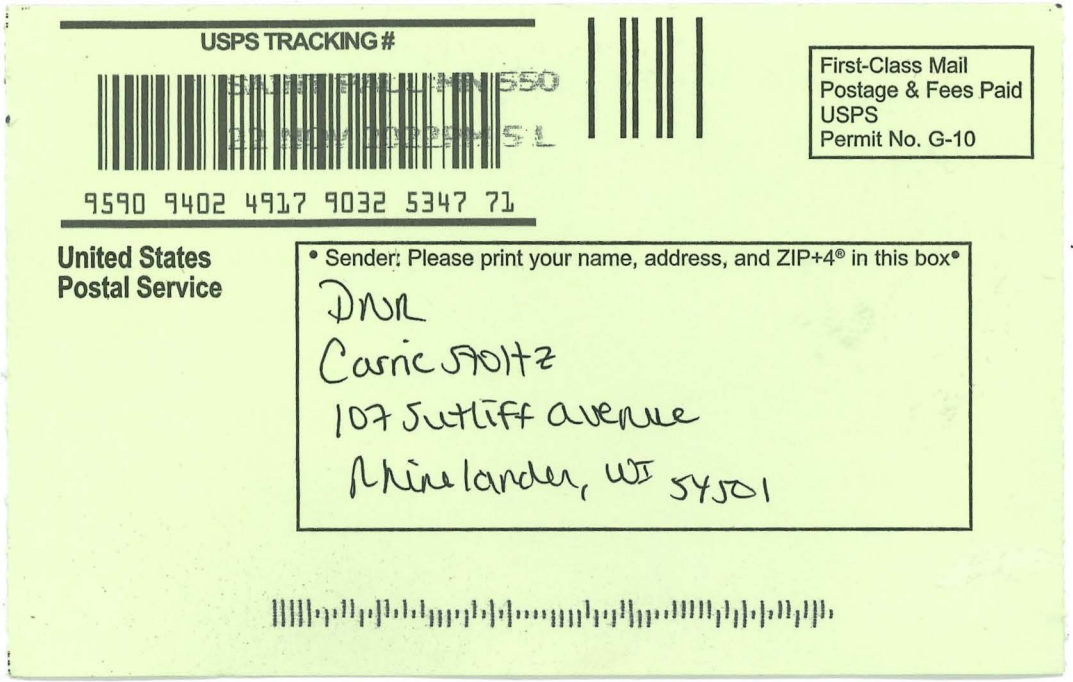
C. Date of Delivery: 11/22/22

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
- ☐ Mail
- ☐ Mail Restricted Delivery
- 00)
- ☐ 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



USPS TRACKING #

9590 9402 4917 9032 5347 71

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

United States
Postal Service

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

DNR
Carrie Foltz
107 Sutliff Avenue
Rhinelander, WI 54501