



City of Milwaukee



3661

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OFFICIAL USE

Certified Mail Fee

- Extra Services & Fees (check box, add fee as appropriate)
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 - Adult Signature Required \$ _____
 - Adult Signature Restricted Delivery \$ _____

Postmark Here

6/7

Postage

Total Postage and Fees

Sent To

240282

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

CHELSEA V CROSS
DANIELLE L SHELTON
2705 E BRADFORD AVE
MILWAUKEE, WI 532110000

M

7021 2720 0000 2293 0661

