



**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$ _____
- Return Receipt (electronic) \$ _____
- Certified Mail Restricted Delivery \$ _____
- Adult Signature Required \$ _____
- Adult Signature Restricted Delivery \$ _____

Postage

\$ _____

Total Postage and Fees

\$ _____

Sent To

Baths - 19024 + 190027

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

City, State, ZIP+4®

Postmark
Here

6/18

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

See Reverse for Instructions

7018 2290 0000 6504 2376

CERTIFIED MAIL®



7018 2290 0000 6504 2376

*Nathalie Baths
830 E. Fairy Chasm
Bayside WI 53217*