

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

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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

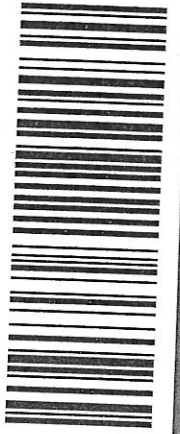
Street and Apt. No., or PO Box No. Burger - 181019

City, State, ZIP+4® _____

Postmark
Here
10/11

PS Form 3800, April 2011 PSN 7530-02-000-9047 See Reverse for Instructions
MILWAUKEE

CERTIFIED MAIL



7017 1450 0000 7569 6938

Dale & Renata Burger
2045 W 2nd St
Milwaukee, WI 53212