

OFFICE OF THE CITY CLERK
 ROOM 205 CITY HALL
 219 E. WELLS STREET
 MILWAUKEE, WISCONSIN 53202

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:

*Milwaukee County Parks HQ
 9480 W Waterbury Plank
 Milwaukee, WI 53226*



9590 9402 3238 7196 5944 74

2. Article Number (Transfer from service label)

7017 1450 0000 7569 6990

Form 3800, July 2015 PSN 7530-02-000-9053

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
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

ii Restricted Delivery

Domestic Return Receipt

7017 1450 0000 7



7017 1450 0000 7569 6990

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

OFFICIAL USE

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

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.

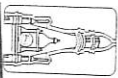
City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Parks - 181146

Postmark Here *WPA*

*Milwaukee County Parks HQ
 9480 W. Waterbury Plank
 Milwaukee, WI 53226*



City
of

**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

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

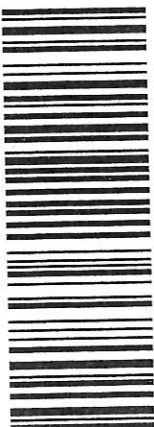
City, State, ZIP+4®

Carriere - Billie

Postmark
Here

MP

7017 1450 0000 7569 7003



*Michael A. Carriere
2225 W 51st St
Milwaukee WI 53208*

7017 1450 0000 7569 7003
MAIL