

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

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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 \$ _____

Postmark
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10/10

Total Postage and Fees

Sent To

Urbid - 190998

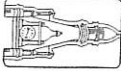
Street and Apt. No., or PO Box No.

City, State, ZIP+4®

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

See Reverse for Instructions

7018 2290 0000 6497 6429



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Total Postage and Fees

Sent To

Dewne - 1909878

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

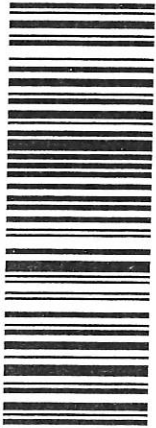
7018 2290 0000 6497 6412



7018 2290 0000 6497 6429

*Brian Ward
 1820 Windrush Dr.
 Grafton, WI 53024*

CERTIFIED MAIL®



7018 2290 0000 6497 6412

*Seth Dewne
 1014 W 6215 Tyler St
 Cedarburg WI 53012*