935	U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only						
-	For delive	For delivery information, visit our website at www.usps.com®.					
35	OFFICIAL USE Certified Mail Fee						
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	City, State, Z	Milwaukee WI 53212					
	PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions						
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
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.	A. Signature X Agent Addressee B. Received by (Printed Name) C. Date of Delivery		
1. Article Addressed to: Lewa Evans 3260 North 47 th Street Milwaukee WI 53216 File 240576	D. Is delivery address different from item 1?		
9590 9402 7749 2152 0938 47 2. Article Number (Transfer from service label) 720 0090 0000 0136 9973	3. Service Type □ Adult Signature □ Adult Signature Restricted Delivery □ Certified Mail® □ Registered Mail Restricted Delivery □ Collect on Delivery □ Collect on Delivery Restricted Delivery □ Insured Mail Restricted Delivery □ Insured Mail Restricted Delivery □ Insured Mail Restricted Delivery ○ Insured Mail Restricted Delivery		
3 Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt		