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<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postage \$ \_\_\_\_\_

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City, State, ZIP+4® \_\_\_\_\_

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


MILWAUKEE

3587

JAMES C STEARNS & AGNES H  
2605 N SUMMIT AVE  
MILWAUKEE, WI 532110000

5/16

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Community Roofing and Restoration  
1776 N. Water St.  
Milwaukee, WI 53202

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