

- Restricted Delivery
- Signature Confirmation
- Return Receipt for Merchandise
- Certified Mail Restricted Delivery
- Registered Mail Restricted Delivery
- Registered Mail™
- Priority Mail Express®
- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Restricted Delivery

7017 1450 0000 7569 6198

9590 9402 2799 7069 1573 30



Article Addressed to:
 Hilva Torbica
 Shepards, LLC
 1848 New Hampshire NE
 St Petersburg, FL 33708

- 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.

D. Is delivery address different from item 1? Yes No

B. Received by (Printed Name) _____ C. Date of Delivery _____

A. Signature *[Signature]*
 Agent Addressee

COMPLETE THIS SECTION ON DELIVERY

SENDER: COMPLETE THIS SECTION

180407

180407

SHEPARDS LLC
 681 34TH AVE NE
 SAINT PETERSBURG FL 33704

0000 7569 6198 1279 0000 7569 6198

RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD

FWD BC: 59202357099 *2474-02731-21-34

0000 7569 6198 0000 7569 6198

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 *Torbica - 180407*
 Street and Apt. No., or PO Box No. _____
 City, State, ZIP+4® _____

Postmark Here

117

City, State, ZIP+4® _____
 Street and Apt. No., or PO Box No. _____
 Sent To *Torbica - 180407*

Total Postage and Fees \$ _____
 Postage \$ _____
 Adult Signature Restricted Delivery \$ _____
 Adult Signature Required \$ _____
 Certified Mail Restricted Delivery \$ _____
 Return Receipt (electronic) \$ _____
 Return Receipt (hardcopy) \$ _____
 Extra Services & Fees (check box, add fee as appropriate) \$ _____
 Certified Mail Fee \$ _____

OFFICIAL USE

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

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

9579 6952 0000 0571 2102

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Office of the City Clerk
 City Hall, Room 205
 200 East Wells Street
 Milwaukee, WI 53202