

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
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Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$
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- Certified Mail Restricted Delivery \$
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

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10/18

Postage \$

Total Postage and Fees \$

Sent To Kidd - 240609

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

7021 2720 0000 2293 2467



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- Adult Signature Restricted Delivery \$

Postmark Here

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Postage \$

Total Postage and Fees \$

Sent To Bethel - 240609

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

7021 2720 0000 2293 2474



Christopher Kidd  
422 N. 15th St.  
Milwaukee, WI 53233

Mark Bethel  
Milwaukee Public Schools  
1124 N. 11th St.  
Milwaukee, WI 53233