

**SENDER: COMPLETE THIS SECTION**

- 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.

1. Article Addressed to:

Endel Williams  
 1012 Pearl St.  
 Racine, WI. 53403



9590 9402 7362 2028 8382 56

2. Article Number (Transfer from service label)

7022 0410 0000 7890 8479

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

 *Endel Williams*

- 
- Agent
- 
- 
- Addressee

B. Received by (Printed Name)

*320*

C. Date of Delivery

 D. Is delivery address different from item 1?  
 If YES, enter delivery address below:

- 
- Yes
- 
- 
- No

3. Service Type

- 
- Adult Signature
- 
- 
- Adult Signature Restricted Delivery
- 
- 
- Certified Mail®
- 
- 
- Certified Mail Restricted Delivery
- 
- 
- Collect on Delivery
- 
- 
- Collect on Delivery Restricted Delivery
- 
- 
- Insured Mail

- 
- Priority Mail Express®
- 
- 
- Registered Mail™
- 
- 
- Registered Mail Restricted Delivery
- 
- 
- Signature Confirmation™
- 
- 
- Signature Confirmation Restricted Delivery

 Insured Mail Restricted Delivery

USPS TRACKING #



MILWAUKEE WI 530

24 AUG 2023 PM 7 L



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

9590 9402 7362 2028 8382 56

**United States  
Postal Service**

• Sender: Please print your name, address, and ZIP+4® in this box•

City of Racine *Clam*  
Office of the City Clerk  
730 Washington Ave Rm 103  
Racine, WI 53403

