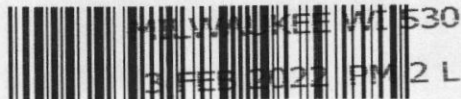


USPS TRACKING #



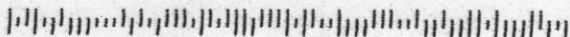
First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

9590 9402 5406 9189 6382 05

United States  
Postal Service

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

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



**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:**

Robert Sackett  
4336 S. 43rd St.  
Greenfield, WI. 53220



9590 9402 5406 9189 6382 05

**2. Article Number (Transfer from service label)**

7019 2970 0000 8077 6964

**COMPLETE THIS SECTION ON DELIVERY****A. Signature****X**☐ Agent☐ Addressee**B. Received by (Printed Name)****C. Date of Delivery**

- D. Is delivery address different from item 1?** ☐ Yes  
If YES, enter delivery address below: ☐ 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☐ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Restricted Delivery