

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:

Crystal Zaehler
805 Lathrop Ave
Racine, WI 53405



9590 9402 6079 0125 1857 12

2. Article Number (Transfer from service label)

7019 2970 0000 8077 7039

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent

Addressee

B. Received by (Printed Name)

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
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Registered Mail Restricted Delivery
(over \$500)

Domestic Return Receipt



City Hall
 730 Washington Avenue
 Racine, Wisconsin 53403
 City of Racine, Wisconsin
 Office of the City Clerk

20
 PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
 OF THE RETURN ADDRESS. FOLD AT DOTTED LINE
CERTIFIED MAIL[®]

MILWAUKEE WI 530



26 AUG 2021 PM 1 L

7019 2970 0000 8077 7039



U.S. POSTAGE PITNEY BOWES
 ZIP 53403 \$ 006.96⁰
 02 4W
 0000366996 AUG 18 2021

FINAL NOTICE

Crystal Zaehler
 805 Lathrop Ave
 Racine,

NAME
 NOTICE 8-28
 NOTICE 9/2
 9/27/21

NIXIE 530 DE 1 0010/03/21

RETURN TO SENDER
 UNCLAIMED
 UNABLE TO FORWARD

UNC

BC: 53403112399 *2325-05057-26-39

53403112399

