2236	U.S. Postal Servic CERTIFIED M (Domestic Mail)	AIL RECEIP	PT rance Coverage Provided)
근거단기	OFF		11 45 =
1000	Postage Certified Fee	246	O CONTINUE OF THE PARTY OF THE
0960	Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)	216	Postmerk X Here
002	Total Postage & Fees	\$ 521	53 53703 98
17	Town of Middleton ATTN: David Shaw 7555 W. Old Sauk Rd. Verona, WI 53593		or instructions

English Commence of the Commen	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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. 	A signature X
1. Article Addressed to:	D is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
Town of Middleton ATTN: David Shaw 7555 W Old Sauk Rd.	
Verona, WI 53593	3 Service Type Certified Mail Registered Return Receipt for Merchandise C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7002 05	PO 0004 54PJ 553P
PS Form 3811, February 2004 Domestic Retu	urn Receipt TD# 06580 102595-02-M-1540