OUITCLAIM DEED

QUITCLAIM DEED TITLE OF DOCUMENT	JOHN LA FAVE REGISTER OF DEEDS
DOCUMENT NO.	Milwaukee County, WI AMOUNT: \$30.00
WHEN RECORDED MAIL TO: uDeed, LLC - 67134 9041 South Pecos Road, Suite 3900 Henderson, NV 89074	FEE EXEMPT #: 77.25(16) 0 ***This document has been electronically recorded and returned to the submitter. **
PARCEL ID NUMBER: 0600157	
This instrument was drafted by: Jerome K. Knapp 100 East Willow Road Fox Point, WI 53217	
	Recording Area
Jerome K. Knapp and Suzanne L. Knapp, husband and and Jerome Karl Knapp, as Trustees of The Jerome I dated April 13, 2013, Grantee,	wife, Grantor, QUITCLAIMS TO Susanne Louise Knapp
THE following described real estate in Milwaukee County,	
LOT 12, EXCEPT THE NORTH 10 FEET THEREOF AND ASSOCIATION OF MILWAUKEE SUBDIVISION NO. 24, E 1/4 OF SECTION 8, TOWN 8 NORTH, RANGE 22 EAST STATE OF WISCONSIN.	EING A SUBDIVISION OF A PART OF THE SOUTHEAST
MORE commonly known as: 100 East Willow Road, Fox Po	sint, Wisconsin 53217
EXEMPT from Transfer Tax under Sec. 77.25(16), Wis. Sta Prior Recorded Doc. Ref.: Warranty Deed: Recorded June	t. 3, 2009 ; Doc. No. 09747092
SUBJECT TO: Restrictions, Conditions, Covenants, Rights	, Rights of Way, and Easements now of record, if any.
$\ensuremath{TOGETHER}$ with all appurtenant rights, title and interest.	
THIS IS (you must make a selection): Homeste	ad PropertyNOT Homestead Property
Dated this 23rd day of	uns and pronouns, include the plural. , 20 3. Suzanne L. Knapp
STATE OF WISCONSIO	EDGMENT
	•
This instrument was acknowledged before me on this 20 13, by Jerome K. Knapp and Susanne L. Knapp.	day of May
HOTARY SEAL	11 - 11 11
MITTE	Signature of Notarial Officer
SAGTARY	Notary
9/0/0 =	Title (and Rank) MY Commission Expires: May 18, 2014

DOC.# 10263018

RECORDED 06/24/2013 12:20PM

SURVEYED FOR

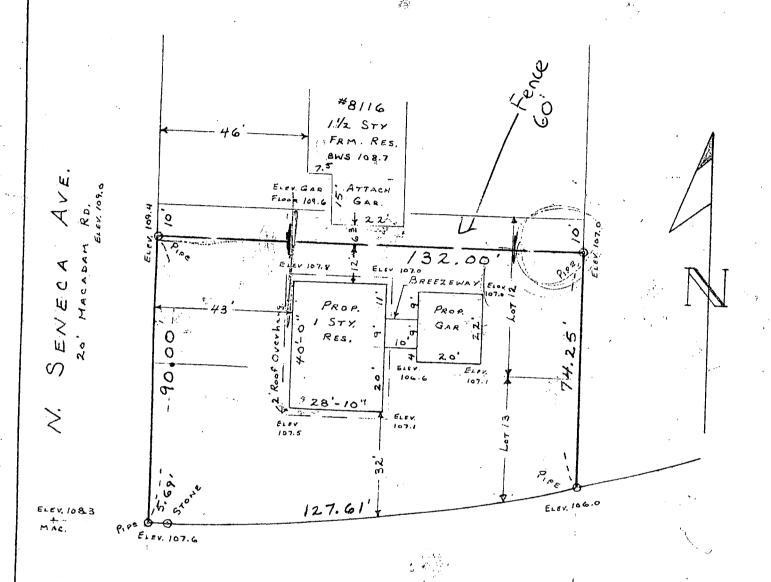
ED. SCHULIST STONE HOMES, INC.

4724 West Forest Home Ave.

DESCRIPTION OF PROPERTY:

Willow Road

Lot 13 and the South 40' of Lot 12 - Block 8 Savings and Investment Association of Milwaukee, Subdivision #24 in the Southeast 1/4 of Section 8 - 8 - 22, Village of Fox Point, Milwaukee County, Wisconsin



WILLOW ROAD 20' MACADAM RD.

"=30

STATE OF WISCONSIN COUNTY OF MILWAUKEE HYD. # 314 AT R REGENT

I HEREBY CERTIFY THAT THE ABOVE SURVEY IS A TRUE REPRESENTATION OF THE LOT LINES THEREOF AND OF THE PRINCIPAL LINES OF THE BUILDINGS THEREON. AND I FURTHER CERTIFY THAT I HAVE PROCURED THE OFFICIAL DESCRIPTION FROM OFFICIAL RECORDS.

DATE OF SURVEY

JULY 6,1955

6 Kierto RICHARD H. GULBRONSON, SURVEYOR 7008 W. OHIO AVE. Fr.

Fr. 4-3007

106.7

H. R. SCHILLING CO., MILWAUKEE

THIS NOTICE WAS DELIVERED BY CERTIFIED & REGULAR MAIL



Property Owner:

VILLAGE OF FOX POINT

MILWAUKEE COUNTY
WISCONSIN

PROPERTY MAINTENANCE COMPLIANCE NOTICE

VILLAGE HALL
7200 N. SANTA MONICA BLVD.
FOX POINT 53217-3505
414-351-8900
FAX 414-351-8909

Date: 8/3///

Address:/	100 Ewillow RD		
The exter	ior of your property was inspects) of noncompliance:	cted for code compliance. T	he inspection revealed the
DESCRIPTION ☐ Fences		COMMENTS/CODE REFE	RENCE
□ Decks			
☐ Retaining Wa	alls		
☐ Accessory Bu	uildings	Th	
□ Dwelling Extended	1		
□ Litter			
□ Grass			
□ Dead Trees			
☐ Exterior Store	age		
□ Unenclosed S	Storage		
□ Other			
items into code o	Chapter 33 of the Village code, compliance byin further action being taken by	 Please be advised that fa 	ng you bring the above ilure to comply with this
Please feel fr	ee to contact me should you h	ave any questions concernir	ng this notice.
		Sincerely,	
		Property Maintenance Insp	ector

*PLEASE BE AWARE THAT FAILURE TO COMPLY WITH THIS NOTICE MAY RESULT IN THE VILLAGE ARRANGING TO HAVE THIS WORK DONE, AT YOUR EXPENSE, PURSUANT TO SECTION 33.8(1)(d) OF THE VILLAGE CODE.

THIS NOTICE WAS DELIVERED BY CERTIFIED & REGULAR MAIL



VILLAGE OF FOX POINT

MILWAUKEE COUNTY
WISCONSIN

PROPERTY MAINTENANCE COMPLIANCE NOTICE

VILLAGE HALL
7200 N. SANTA MONICA BLVD.
FOX POINT 53217-3505
414-351-8900
FAX 414-351-8909

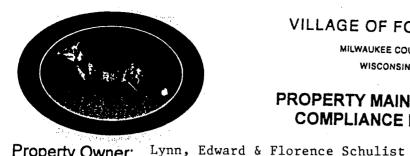
Pr	roperty Owner: _	Jerome	& Suza	nne Knapp	-	Date:J	uly 15, 20	10
Αd	ddress:	100 E.	Willow	Road	-			
fo	The exterio				ed for code c	ompliance	e. The inspe	ection revealed the
DI	ESCRIPTION			9	COMMENTS	CODE RE	FERENCE	1
	Fences							
	Decks	-		Iob	served on 1	u1v 14 2	nin that vo	our grass is
	Retaining Wall	s		I observed on July 14, 2010 that your grass 7-8 inches tall. This is a violation of Section 33.3(2) of the Village Code which limits grass height to four (4)		33.3(2) of		
	Accessory Buil	dings		inches.				
	Dwelling Exter	or		Please bring	ng your lawn	into code	e complian	ce by
	Litter				-			
K	Grass							
	Dead Trees							
	Exterior Storag	e						
	Unenclosed St	orage						
	Other							
ite no	Pursuant to Ch ms into code co tice will result in	mplianc	e by <u>Ju</u>	ly 29 , 2010 .	Please be a	dvised tha	quiring you bat failure to d	oring the above comply with this

Please feel free to contact me should you have any questions concerning this notice.

Property Maintenance Inspector

*PLEASE BE AWARE THAT FAILURE TO COMPLY WITH THIS NOTICE MAY RESULT IN THE VILLAGE ARRANGING TO HAVE THIS WORK DONE, AT YOUR EXPENSE, PURSUANT TO SECTION 33.8(1)(d) OF THE VILLAGE CODE.

THIS NOTICE WAS DELIVERED BY CERTIFIED & REGULAR MAIL



VILLAGE OF FOX POINT

MILWAUKEE COUNTY WISCONSIN

PROPERTY MAINTENANCE **COMPLIANCE NOTICE**

VILLAGE HALL 7200 N. SANTA MONICA BLVD. FOX POINT 53217-3505 414-351-8900 FAX 414-351-8909

•	reporty eviner.	Date: July 29, 2009	
Α	ddress:100 E. Willow B	Road	
fo	The exterior of your property sllowing items(s) of noncompliance	was inspected for code compliance. The inspection revealed the	
<u>D</u>	ESCRIPTION Fences	COMMENTS/CODE REFERENCE	
	Decks		
	Retaining Walls	I observed on July 29, 2009 that your grass is 5-6 inches tall. This is a violation of Section 33.3(2) of	
	Accessory Buildings	the Village Code which limits grass height to four (4) inches.	
	Dwelling Exterior	Please bring your lawn into code compliance by	
	Litter	August 10, 2009.	
ĽΧ	Grass		
	Dead Trees		
	Exterior Storage		
	Unenclosed Storage		
	Other		
iter not	Pursuant to Chapter 33 of the Villes into code compliance by Augustice will result in further action beir	lage code, the Village is hereby requiring you bring the above $\frac{t-10}{t}$. Please be advised that failure to comply with this age taken by this department.	

Please feel free to contact me should you have any questions concerning this notice.

Property Maintenance Inspector

*PLEASE BE AWARE THAT FAILURE TO COMPLY WITH THIS NOTICE MAY RESULT IN THE VILLAGE ARRANGING TO HAVE THIS WORK DONE, AT YOUR EXPENSE, PURSUANT TO SECTION 33.8(1)(d) OF THE VILLAGE CODE.

State Bar of Wisconsin Form 1-2003 WARRANTY DEED

Document Number

Document Name

THIS DEED, made between LYNN C SCHULIST

("Grantor," whether one or more), and JEROME K KNAPP AND SUZANNE L KNAPP, husband and wife

("Grantee." whether one or more)

Grantor, for a valuable consideration, conveys to Grantee the following described real estate, together with the rents, profits, fixtures and other appurtenant interests, in MILWAUKEE County, State of Wisconsin ("Property")(If more space is needed, please attach addendum)

Lot 12, except the North 10 feet thereof and all of Lot 13, Block 8, Savings and Investment Association of Milwaukee Subdivision No 24, being a Subdivision of a part of the Southeast 1/4 of Section 8, Town 8 North, Range 22 East, Village of Fox Point, County of Milwaukee, State of Wisconsin

Tax Key No 060-0157

*Type name below signatures

DOC.# 09747092

REGISTER'S OFFICE Milwaukee County, WI!

RECORDED 06/03/2009 01:57PM

JOHN LA FAVE REGISTER OF DEEDS AMOUNT: 11.00 FEE EXEMPT 77.25 #: 0

603.00

SEAL)

(SEAL)

} ss

Recording Area

TRANSFER FEE:

ox Point W153217

060-0157

Parcel Identification Number (PIN)

This 18 not_homestead property (is)(is not)

Address 100 E WILLOW ROAD *EDWARD SCHULIST IS JOINING IN THE EXECUTION OF THIS DEED TO CONVEYHIS LIFE ESTATE INTEREST.

Grantor warrants that the title to the Property is good, indefeasible in fee simple and free and clear of encumbrances except municipal and zoning ordinances and agreements entered under them, recorded easements for the distribution of utility and municipal services, recorded building and use restrictions and covenants, and general taxes levied in the year of closing

(SEAL) (SEAL) ACKNOWLEDGN AUTHENTICATION STATE OF WISCONSIN Signature(s) Milwarkee COUNTY authenticated on Personally came before me on the above named LYNN C SCHULIST AND EDWARD SCHULIST to me known to be the person(s) who executed the foregoing TITLE MEMBER STATE BAR OF WISCONSIN instrument and acknowledged the same authorized by Wis Stat S706 06) Notary Public, State of Wisconsin THIS INSTRUMENT DRAFTED BY My commission (is permanent)(expires PATTERSON ATTORNEY JEFFERY P

NOTE THIS IS A STANDARD FORM ANY MODIFICATIONS TO THIS FORM SHOULD BE CLEARLY IDENTIFIED

WARRANTY DEED

2003 STATE BAR OF MISCONICE

WARRANTY DEED (Signatures may be authenticated or acknowledged Both are not necessary) ewdeedn 9/05



100 E. Willow

TERMINATION OF DECEDENT'S PROPERTY INTEREST

Use black ink

DECEDENT'S NAME	DATE OF DEATH		
FLORENCE SCHULIST	4-1707		
ADDRESS OF DECEDENT AT DATE OF DEATH	CITY A	ST	ZIP
WITH N9430 Kilverenest Dr. #234	Meno Jalb	WI	53357

PRESENTATION OF DEATH CERTIFICATE

I certify that I have viewed a certified control the decedent's death certificate

JUN - 3 2009

REGISTER OF DEEDS SIGNATURE

Interest in property is terminated under (please check appropriate statute)

s 867 045 which pertains to property in which the decedent was a joint tenant, had a vendor's or mortgagee's interest, or had a life estate (You must provide a copy of the document establishing joint tenancy or life estate)

s 867 046 which pertains to (1) property of a decedent specified in a marital property agreement, and also to (2) survivorship marital property (You must provide a copy of the document establishing survivorship marital property)

s 705 20 Nonprobate Transfers on Death A provision for a nonprobate transfer on death in a trust, conveyance deed of gift or marital property agreement (You must provide a copy of the document establishing transfer at death)

060-0157

Parcel Identification Number

Recording area
Name and Return Address

LYNN C SCHULIST

RECORDED

AMOUNT.

DOC.# 09747091

06/03/2009 01·57PM

25.00

REGISTER'S OFFICE | SS Milwaukee County, WI|

JOHN LA FAVE

REGISTER OF DEEDS

FEE EXEMPT 77.25 #: 0

N82 W13516 Fond du lac Ave. #107B

Menomonee Falls, WI 53015

Presentation of recorded document establishing joint tenancy, life estate, survivorship marital property, vendor interest, or mortgagee interest in real estate

9038511

VOLUME/REEL

PAGE/IMAGE

RECORDS/DEEDS

Description of the real estate.

Include only the extent of ownership (or vendor or mortgagee's interest) in land at the time of the decedent's death—If the extent of land is exactly the same as on the document, a copy of that document may be attached to describe the real estate. Attach tax bill(s) for year immediately preceding death, if applicable—(See directions)—The legal description of the property and the persons receiving the property are as follows—(If more space is needed, attach pages)

X See Attached

Description of personal property (if any) being transferred

You may list savings accounts, checking accounts and securities on attached pages Indicate person(s) receiving property

Declaration: I(We) declare that this document is, to the best of my(our) knowledge and belief, true, correct and complete and is in conformity with the provisions and limitations of the Wisconsin Statutes (If more space is needed, attach pages)

Name and Address of Person(s) Receiving Property	Relationship to Decedent	Signature(Notarized)	Date
LYNN C SCHULIST N82W13516 FOND DU LAC AVE Menomonee Falls, WI 53051	DAUGHTER	Lync. khuli	1 5/12/09

This document was drafted by (print or type name below) Lynn C. Schulist

NOTE SEE DIRECTIONS
Wisconsin Register of Deeds
Association Form HT-110
Website Version 6/2003

ht1109/05

STATE OF WISCONSIN, County of Wav-Kerna

Subscribed and sworn to before me by the above named person(s) on Signature of Notary or other person authorized to administer an oath (as per s 706 06, 706 07)

Mau 12, 2009 <u>· UB Son</u>

Print or type name M B Soni

Title Notary Public

Date Commission Expires

10-30-2011

100 E. Willow

STATE BAR OF WISCONSIN FORM 3 – 2000 **QUIT CLAIM DEED**

Document Number	DUC.# 090385/1
This Deed, made between EDWARD SCHULIST a FLORENCE SCHULIST, husband and wife,	nd REGISTER'S OFFICE SS Milwaukee County, WI
	RECORDED 06/28/2005 03:59PM
and LYNN C. SCHULIST, a single person	JOHN LA FAVE REGISTER OF DEEDS
	, Grantee. AMOUNT:11.00
Grantor quit claims to Grantee the following describ Milwaukee County, State of Wisconsin (if me	ed real estate in
please attach addendum):	!
Lot Twelve (12), except the North Te feet thereof, and Lot Thirteen (13), Eight (8), in the Savings and Invest	in Block ment
Association of Milwaukee Subdivision being a subdivision of a part of the East One-quarter (1/4) of Section Ei in Township Eight (8) North, Range T two (22) East, in the Village of Fox County of Milwaukee and State of Wis	South ght (8), wenty- Point, This is homestead property.
Subject to a life estate retained by Grantors for their joint lives. Together with all appurtenant rights, title and interests.	the # FEE 77.25 EXEMPT (8)
Dated this 22nd day of June Solution School of Seal) * EDWARD SCHULIST (SEAL)	Florence schulist * FLORENCE SCHULIST
* EDWARD SCHULIST	* _FLORENCE_SCHULIST
(SEAL)	(SEAL)
*	*
AUTHENTICATION Signature(s) EDWARD SCHULIST and FLORENCE SCHULIST authenticated the 22nd day of June 2005	ACKNOWLEDGMENT State of Wisconsin, ss.
authenticated this 22nd day of tune 2005 * JACK W. PATRICK	Personally came before me this day of, the above named
TITLE: MEMBER STATE BAR OF WISCONSIN (If not, authorized by §706.06, Wis. Stats.)	to me known to be the person who executed the foregoing instrument and acknowledge the same.
THIS INSTRUMENT WAS DRAFTED BY	
Attorney Jack W. Patrick	Notary Public, State of Wisconsin
(Signatures may be authenticated or acknowledged. Both are not necessary.)	My commission is permanent. (If not, state expiration date:
Names of persons signing in any capacity must be typed or printed below their signature. STATE BAR O	F WISCONSIN Wisconsin Legal Blank Co., Inc.
	p. 3 – 2000 Miwaukee, Wis



VILLAGE OF FOX POINT

MILWAUKEE COUNTY
WISCONSIN

VILLAGE HALL 7200 N. SANTA MONICA BLVD. FOX POINT 53217-3505 414-351-8900 FAX 414-351-8909

VILLAGE OF FOX POINT PROPERTY MAINTENANCE COMPLIANCE NOTICE

Prope Addre	rty Owner Schulist ess 150 E. Willow R.D.	Date 6-15-06
item(s	The exterior of your property was inspects) of noncompliance:	ted for code compliance. The inspection revealed the following
Descr	<u>iption</u>	Comments/Code Reference
	Fences	
	Decks	04
	Retaining Walls	
	Accessory Buildings	
	Dwelling Exterior	
	Litter	
	Grass	
	Dead Trees	
	Exterior Storage	
	Unenclosed Storage	
	Other	
into co	Pursuant to Chapter 33 of the Village codode compliance by Please action being taken by this department.	e, the Village is hereby requiring you bring the above items be advised that failure to comply with this notice will result in
	Please feel free to contact me should you	have any questions concerning this notice.
	Sinc	cerely,

Property Maintenance Inspector

VILLAGE OF FOX POINT

MILWAUKEE COUNTY WISCONSIN

VILLAGE HALL 7200 N. SANTA MONICA BLVD. FOX POINT 53217-3505 414-351-8900 FAX 414-351-8909

VILLAGE OF FOX POINT PROPERTY MAINTENANCE **COMPLIANCE NOTICE**

	erty Owner EDWARD SCHO	JUIST	Date if Jun o	į
Addr	ess 100 & MILLOW	NO		
with does	The Village's goal is to insp the Village's Property Mainten not adhere to Village code in	nance Code. An inspection	operties within the Village to on of your property has revea	ensure compliance led that your property
Desci	<u>ription</u>	Comments		
	Fences	ok ST		
O O	Decks	4.		
	Retaining Walls			
a	Accessory Buildings			
ū	Dwelling Exterior			
	Litter			
	Grass		•	•
	Dead Trees			
	Exterior Storage	٠	*	
ם	Other			
eferer otice	Pursuant to section 33.7 of the need items into code complian will result in a citation to app	CC UV . F	age hereby requests that you be lease be aware that failure to	oring the above comply with this
	Please feel free to contact the	Village should you hav	e any questions concerning th	is notice.
		Sincerely,		·

Property Maintenance Inspector

ED, SCHULIST

SURVEYED FOR

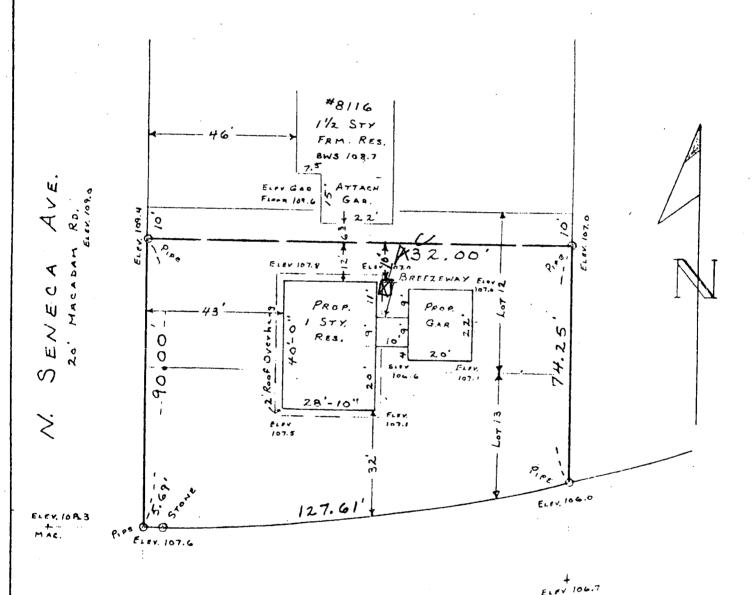
STONE HOMES. INC.

4724 West Forest Home Ave.

DESCRIPTION OF PROPERTY:

100 Willow Road

Lot 13 and the Bouth 40' of Lot 12 - Block 8 Savings and Investment Association of Milwaukee, Subdivision #24 in the Southeast 1/4 of Section 8 - 8 - 22, Village of Fox Point, Milwaukee County, Wisconsin



Mac + ELEV /08.5

ELEN 107.6

WILLOW ROAD

SCALE /"= 30"

STATE OF WISCONSIN (SS COUNTY OF MILWAUKEE)

BM. HYD. # 314 AT WILLOW & REGENT ELEV. 104977

I HEREBY CERTIFY THAT THE ABOVE SURVEY IS A TRUE REPRESENTATION OF THE LOT LINES THEREOF AND OF THE PRINCIPAL LINES OF THE BUILDINGS THEREON, AND I FURTHER CERTIFY THAT I HAVE PROCURED THE OFFICIAL DESCRIPTION FROM OFFICIAL RECORDS.

DATE OF SURVEY

JULY 6,1955

RICHARD H. GULBRONSON. SURVEYOR
7008 W. OHIO AVE. Fr. 4-3007



ABUTTING NEIGHBOR NOTIFICATION FORM FOR PROPOSED CONSTRUCTION

Property Owner

The Fox Point Building Inspector

Notice of Proposed Construction

TO:

RE:

FROM:

Please have your abutting neighbors complete this form when proposing construction on your property that requires notification to abutting property owners. Please attach the detailed drawings or plans of the proposed structure or construction to this form.
Proposed construction (Describe): 6 x 60 wooden privary fence along property line. Fence will run from existing hedge on west to pine tree on east.
The construction will occur at (Address): 100 E willow 12d. Fox Point.
PER Your survey please make sure the fence is 6 from my garage. Name(s): Gayla Greis Address: 8/10 N. Seneca Rd., Fox Point, W153217
I/We have read and reviewed the application and seen and reviewed the plans or drawings for
the proposed construction described above and:
Approve of the Application as submitted.
Object to the Application as submitted.
If you object, briefly state your reason(s):
Date: 6-16-2013 Signature: 9.8ni.

NEIGHBOR NUMBER 2

Name(s):
Address:
I/We have read and reviewed the application and seen and reviewed the plans or drawings
the proposed construction described above and:
Approve of the Application as submitted.
Object to the Application as submitted.
If you object, briefly state your reason(s):
Date: Signature:
Name(s):
Address:
I/We have read and reviewed the application and seen and reviewed the plans and drawings
the proposed construction described above and:
Approve of the Application as submitted.
Object to the Application as submitted.
If you object, briefly state your reason(s):
a year object, officially state year reason(b).
Date: Signature:

ED. SCHULIST

SURVEYED FOR

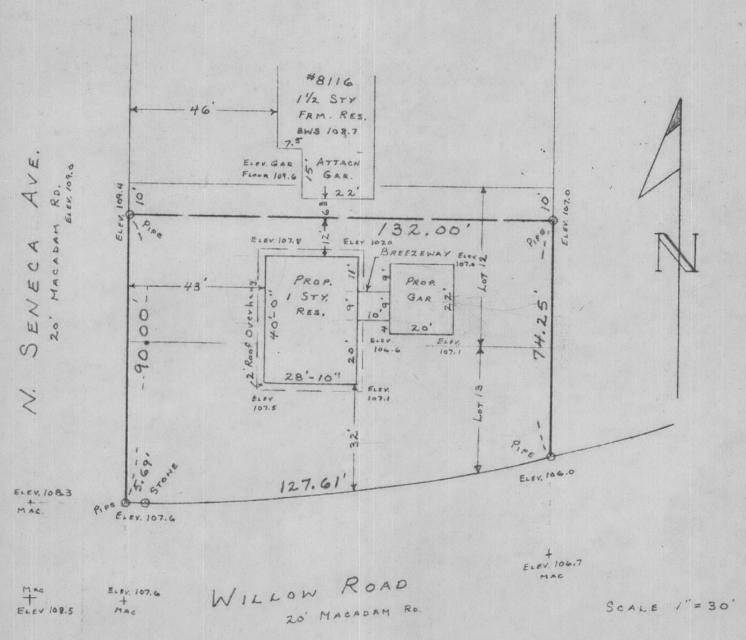
STONE HOMES, INC.

4724 West Forest Home Ave.

DESCRIPTION OF PROPERTY:

100 Willow Road

Lot 13 and the South 40' of Lot 12 - Block 8 Savings and Investment Association of Milwaukee, Subdivision #24 in the Southeast 1/4 of Section 8 - 8 - 22, Village of Fox Point, Milwaukee County, Wisconsin



STATE OF WISCONSIN (ss.

BM. HyD. # 314 AT WILLOW & REGENT ELEV. 104.77

I HEREBY CERTIFY THAT THE ABOVE SURVEY IS A TRUE REPRESENTATION OF THE LOT LINES THEREOF AND OF THE PRINCIPAL LINES OF THE BUILDINGS THEREON, AND I FURTHER CERTIFY THAT I HAVE PROCURED THE OFFICIAL DESCRIPTION FROM OFFICIAL RECORDS.

DATE OF SURVEY

JULY 6, 1955

RICHARD H. GULBRONSON, SURVEYOR
7008 W. OHIO AVE. Fr. 4-3007

Savings + Invest. assoc. #24 Lot 13 & S. 40' Lot12 Block 8

by say val

Darring & Jun. Assoc. # 24

Certified Mail Provides:

- A mailing receipt
- A unique identifier for your mailpiece
- A record of delivery kept by the Postal Service for two years

Important Reminders:

- Certified Mail may ONLY be combined with First-Class Mail_® or Priority Mail_®.
- Certified Mail is not available for any class of international mail.
- NO INSURANCE COVERAGE IS PROVIDED with Certified Mail. For valuables, please consider Insured or Registered Mail.
- For an additional fee, a Return Receipt may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS_® postmark on your Certified Mail receipt is required.
- For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "Restricted Delivery".
- If a postmark on the Certified Mail receipt is desired, please present the article at the post office for postmarking. If a postmark on the Certified Mail receipt is not needed, detach and affix label with postage and mail.

IMPORTANT: Save this receipt and present it when making an inquiry.

PS Form 3800, August 2006 (Reverse) PSN 7530-02-000-9047

中 THO П ㅁ П 4000 m 87

U.S. Postal Service CERTIFIED MAIL™ RECEIPT

(Demestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

Postage Certified Fee 2.80 Return Receipt Fee 2.30 (Endorsement Required) Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$ 5,54

Postmark Here

Sent To

tynn, Eduard & Flore Scholot Street, Apt. No.; 100 E W,710WD or PO Box No.

City, State, ZIP+4

Certified Mail Provides:

- A mailing receipt
- A unique identifier for your mailpiece
- A record of delivery kept by the Postal Service for two years

Important Reminders:

- Certified Mail may ONLY be combined with First-Class Mail[®] or Priority Mail[®].
- Certified Mail is not available for any class of international mail.
- NO INSURANCE COVERAGE IS PROVIDED with Certified Mail. For valuables, please consider Insured or Registered Mail.
- For an additional fee, a Return Receipt may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS⊕ postmark on your Certified Mail receipt is required.
- For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "Restricted Delivery".
- If a postmark on the Certified Mail receipt is desired, please present the article at the post office for postmarking. If a postmark on the Certified Mail receipt is not needed, detach and affix label with postage and mail.

IMPORTANT: Save this receipt and present it when making an inquiry.

PS Form 3800, August 2006 (Reverse) PSN 7530-02-000-9047

U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

Postage 2,80 Certified Fee Return Receipt Fee 2.30 (Endorsement Required) Restricted Delivery Fee (Endorsement Required)

Postmark Here

Total Postage & Fees \$

Sent To

9698

5 068

2000

1470

0

Street, Apt. No.: or PO Box No.

Jd S Krapp 100 Ewillow Pd

City, State, ZIP+4

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. 1. Article Addressed to: Teyome & Suzanne Iznapp loo E willow Road	A. Signature X Addressee B. Received by (Printed Name) O. Date of Delivery D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
Fox Boint, WI 53217	3. Service Type Certified Mail
2. Article Number 7009 14:	10 0002 0685 8696
PS Form 3811, February 2004 Domestic Retu	urn Receipt 102595-02-M-1540

UNITED STATES POSTAL SERVICE E WIL 5 52 Postage & Fees Raid Deps 20 301 2010 FM Postage & Fees Raid Deps 20 301 2010 FM

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

Village of Fox Point 7200 North Santa Monica Blvd. Fox Point, WI 53217

Tb



7200 N. SANTA MONICA BLVD. FOX POINT, WISCONSIN 53217-3505

CERTIFIED MAIL



7008 1830 0004 2402 1408



Lynn, Edward & Florence Schulist 100 E. Willow Road Fex Point, WI 53217

> SCHU100* 590 5C 1 N C 06 08/01/09 UNABLE TO FORWARD/FOR REVIEW **C070**

NO FORWARDING ORDER ON FILE
RETURN TO POSTMASTER
OF ORIGINAL ADDRESSEE FOR REVIEW
BC: 53217275800 PM *2025-09761-30-35

իհի...ՍյուելույՍե...Սերևիսևիսևիևիևիևիևի

53217@9999 53217+2758

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. Article Addressed to: 		A. Signature	☐ 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	
Lynn, Edward Florence Schulbt			
Schulst		2 Camina Time	
FOX POINTIN 82.		3. Service Type Certified Mail Registered Insured Mail C.O.D.	
		4. Restricted Delivery? (Extra Fee)	☐ Yes
Article Number 7 [(Transfer from service label)	08 183	0 0004 2402 1408	
PS Form 3811, February 2004	Domestic Retu	ırn Receipt	102595-02-M-1540