

910369-TC

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

3. Article Addressed to: THOMAS L. DOUTT 8450 SW 14th COURT PEMBROKE PINES, FL 33025-3327	4. Article Number 78870
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
Always obtain signature of addressee or agent and DATE DELIVERED .	
5. Signature - Addressee X <i>Thomas Douth</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X	
7. Date of Delivery 5-21-96	

PS Form 3811, Apr. 1993 U.S.G.P.O. 1993-230-015 **DOMESTIC RETURN RECEIPT**

- ACK _____
- AFA _____
- APP _____
- CAF _____
- CMU _____
- CTR _____
- EAG _____
- LEG _____
- LIN _____
- OPC _____
- RCH _____
- SEC
- WAS _____
- OTH _____

DOCUMENT NUMBER-DATE

05223 MAY 23 1996

100-RECORDS/REPORTING