

to on the reverse side?

SEND TO:

Complete items 1 and/or 2 for additional services.
 a) Complete items 3, 4a, and 4b.
 b) Print your name and address on the reverse of this form so that we can return the card to you.
 c) Attach the form to the front of the mailpiece, or on the back if space does not permit.
 d) This Return Receipt Requester on the mailpiece below the article number.
 e) The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to: 970419 4a. Article Number 970419

LPR Telephones Unlimited, Inc.
 Ms. Darlene Caye
 561 Thornton Road, Suite K
 Lithia Springs GA 30057

1. I also wish to receive the following services (for an extra fee):
 1. Addressee's Address
 2. Restricted Delivery
 Consult postmaster for fee.

2. Type 97-0197
 Certified
 Mail
 Insured
 COD
 Receipt for Merchandise
 Delivery

6. Signature: Addressee or Agent
X Darlene Caye

PS Form 3811, December 1994

Domestic Return Receipt

and fee is paid)

ee's Address (Only if requested)

Thank you for using Return Receipt Service.

DOCUMENT NUMBER-DATE
 06161 JUN 1965
 FPSC-RECORDS/REPORTING