

ORIGINAL

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ad on the reverse side?	SENDER: ■ Complete items 1 and/or 2 for additional services. ■ Complete items 3, 4a, and 4b. ■ Print your name and address on the reverse of this form so that we can return this card to you. ■ Attach this form to the front of the mailpiece, or on the back if space does not permit. ■ Write "Return Receipt Requested" on the mailpiece below the article number. ■ The Return Receipt will show to whom the article was delivered and the date delivered.		I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.
	3. Article Addressed to: <u>980173</u> Erik Larson 1551 Lemon Street Clearwater FL 34616-2342	4a. Article Number <u>98-001413</u>	<input checked="" type="checkbox"/> Certified <input type="checkbox"/> Insured <input type="checkbox"/> Merchandise <input type="checkbox"/> COD <u>4-16-8</u> Address (Only if requested)
Is your RE:	6. Signature: (Addressee or Agent) <u>X</u>		Thank you for using Return Receipt Service.
PS Form 3811, December 1994		Domestic Return Receipt	

- ACK _____
- AFA _____
- APP _____
- CAF _____
- CMU _____
- CTR _____
- EAG _____
- LEG _____
- LIN _____
- OPC _____
- RCH _____
- SEC 1
- WAS _____
- OTH _____

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