ORIGINAL

2479

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. Addressee's Address 2. Restricted Delivery Consult postmaster for fee.			ceipt Service.
ADDRESS completed on	3. Article Addressed to: 99/346 Juan R. Acevedo 2039 Bridges Drive, C Tampa FL 33621-1440	4a. Article N	lumber	chandise	Certified Insured COD	u for using Return Rece
is your RETURN	6. Signature: (Addresses or Agent) X MAN PS Form 3811 , December 1994	102595-98-B-0229	Domes	· · ·	if requested	Thank yo

AFA
APP
CAF
CMU
CIR
EAG
LEG
MAS
OPC
RRR
SEC
WAW
OTH

DOCUMENT NUMBER-DATE

QQ344 JAN-78