ORIGINAL

SENDER: I also wish to receive the 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 complete the service of th following services (for an extra fee): Serio 1. Addressee's Address ermit. 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 Z 2. Restricted Delivery ŝ Consult postmaster for fee. Receipt delivered. 5 4a. Article Number 3. Article Addressed to: 991528 τ 9 Return Freedom Communications Corporation A. Strauss using 🗆 Insured 2444 P. O. Box 1910 Delray Beach FL 33447-1910 r Merchand Thank you for requested odress (Q hly H 149 6 Signature: (Addressee or Agent) your 102595-98-B-0229 Domestic Return Receipt 2 PS Form **3811,** December 1994

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