

	SENDER:
2	■ Complete iter

■ 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

Attach this form to the front of the mailpiece, or on the back if space does not

■ Write "Return Receipt Requested" on the mailpiece below the article number.

following services (for an extra fee):

1. Addressee's Address

2. Restricted Delivery

Consult postmaster for fee.

Journey Telecom International, Inc. Jack Goldwater 6919 Valjean Avenue Van Nuys CA 91406

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☐ Certified ☐ Insured

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

PS Form **3811**, December 1994

8. Addressee's Address (Only if requested and fee is paid)

Domestic Return Receipt

0073

DOCUMENT NUMBER-DAT

