

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to: 000933

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) B. Date of Delivery

M. STEFAN 9/27/00

C. Signature  Agent

[Signature]  Addressee

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

Call Communication Inc.  
vienne E. Johnson  
26 West Colonial Drive  
lando FL 32818-6743

- Express Mail
- Return Receipt for Merchandise
- C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number (Copy from service label)

7000 0600 0026 4145 6539

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

APP \_\_\_\_\_  
 CAF \_\_\_\_\_  
 CMP \_\_\_\_\_  
 COM \_\_\_\_\_  
 CTR \_\_\_\_\_  
 ECR \_\_\_\_\_  
 EG \_\_\_\_\_  
 JPC \_\_\_\_\_  
 JAI \_\_\_\_\_  
 JGO \_\_\_\_\_  
 JEG \_\_\_\_\_  
 JER \_\_\_\_\_  
 JTH \_\_\_\_\_

DOCUMENT NUMBER-DATE

12423 SEP 29 8

FPSC RECORDS REPORTING