000959-TC 1708-PAA

SENDER, COMPLETE THIS SECTION	COMPLETE THIS	COMPLETE THIS SECTION ON DELIVERY		
 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. 	A. Received by (P/ C. Signature X Accord	ease Print Clearly)	B. Date of Delivery 9-27-00 Agent Addressee n 12 9 Yes	
1. Article Addressed to:	11	If YES enter delivery address below: No		
N utrend Communications. Inc. rank Paglianti ,03 S.W. 14th Court ompano Beach FL 33060-8908				
Supuno Beden na Corres	A	 Express Ma Return Rece C.O.D. 	il eipt for Merchandise	
	4. Restricted Deliv	4. Restricted Delivery? (Extra Fee)		
2. Article Number (Copy from service label) フルマン	0600 0026	4145 64	85	
P\$ Form 3811, July 1999 Domestic	Return Receipt		102595-99-M-1789	

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Sec. 1

DOCUMENT NUMBER-DATE

FPSC-RECORDS/REPORTING