

ORIGINAL

1207-PAA

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Received by (Please Print Clearly)	B. Date of Delivery 10-3-00
1. Article Addressed to: 000928-TC	C. Signature X <i>Eugene W. Kligmann</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	

Three Rivers Phone Corp.  
 Eugene W. Kligmann  
 2745 Stirrup Lane  
 Ft. Lauderdale FL 33331-3020

P

- Express Mail
  - Return Receipt for Merchandise
  - C.O.D.
- (Extra Fee)  Yes

2. Article Number (Copy from service label)

7000 0600 0026 4145 6553

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

- APP \_\_\_\_\_
- CAF \_\_\_\_\_
- CMP \_\_\_\_\_
- COM \_\_\_\_\_
- CTR \_\_\_\_\_
- ECR \_\_\_\_\_
- LEG \_\_\_\_\_
- OPC \_\_\_\_\_
- PAI \_\_\_\_\_
- RGO \_\_\_\_\_
- SEC   I
- SER \_\_\_\_\_
- OTH \_\_\_\_\_

DOCUMENT NUMBER-DATE

12790 OCT-68

FPSC-RECORDS/REPORTING