SENDER: «Complete items 1 and/or 2 for additional services. »Complete items 3, 4s, 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 malipiece, or on the back if space does not permit. «Write "Return Receipt Requested" on the malipiece below the article number. »The Return Receipt will show to whom the article was delivered and the date delivered.	Addressee's Address Restricted Delivery Consult postmaster for fee.
InVision Telecom, Inc. Jeanie Ray 1150 Northmeadow Parkway, Suite 118 Roswell GA 30076	lumber 99 A(n) 3 Certified □ Insured Aerchandise □ COD
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6. Signature: (Addressee or Agent) X PS Form 3811, December 1994	Domestic Return Recei

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