

010501-7C

ORIGINAL

1562-PAA

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Received by (Please Print Clearly) <u>RNO Carter</u></p>	<p>B. Date of Delivery <u>8-2-01</u></p>
<p>1. Article Addressed to: <u>010501</u></p>		<p>C. Signature <u>[Signature]</u></p>	<p><input type="checkbox"/> Agent</p> <p><input type="checkbox"/> Addressee</p>
<p>Robert W. Carter P. O. Box 2998 Lake Placid FL 33862-2998</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes</p> <p>If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>2. Article Number (Copy from service label)</p>		<p><input checked="" type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> C.O.D.</p>	
<p>3. Article Number (Copy from service label)</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

APP _____
CAF _____
CMP _____
COM _____
CTR _____
ECR _____
LEG _____
OPC _____
PAI _____
RGO _____
SEC T _____
SER _____
OTH _____

DOCUMENT NUMBER - DATE

09500 AUG-6

FPSC-COMMISSION CLERK