960798

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, 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 mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

C-W Enterprises
~~1261 S.W. 1st Avenue, Side B~~
Boca Raton FL 33432-7106

FWD

4a. Article Number 96-0244

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery 8/26/96

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)
not requested

6. Signature: (Addressee or Agent)
X

PS Form 3811, December 1994 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

DOCUMENT NUMBER-DATE
09178 AUG 29 96
FPSC-RECORDS/REPORTING