

Is your postmark

Postmark
PS Form 3811, December 1991

U.S. GPO: 1989-225-714

DOMESTIC RETURN RECEIPT

Jack Varon and Mildred Varon
871 N.E. 207th Lane, #102
North Miami Beach FL 33179-1930

ted on the reverse side?

SENDER:

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

3. Article Addressed to:

961490

4a. Article Number

97-0019

4b. Service Type

- Registered
- Certified
- Insured
- COD
- Express Mail
- Return Receipt for Merchandise

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

to receive the following services (for an extra fee):
 Registered Address
 Registered Delivery
 Default postmaster for fee.

Thank you for using Return Receipt Service.

- ACK _____
- AFA _____
- APP _____
- CAF _____
- CMU _____
- CTR _____
- EAG _____
- LEG _____
- LIN _____
- OPC _____
- RCH _____
- SEC 1 _____
- WAS _____
- OTH _____

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