

DOCUMENT NO.
0804577
05/20/97

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.

3. Article Addressed to: 920097

4a. Article Number: 92-0097

Type of service requested:
 Registered Mail
 Insured Mail
 COD receipt for Merchandise
 COD delivery

5/12/97

Signature: (Addressee or Agent)
Ximena Buitrago

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

Registered TeleServices, Inc.
 15 North Fine Street, Suite 101
 Asno CA 93727

Is your RE
 93727/151C 15