

ACK _____
 AFA _____
 APP _____
 CAF _____
 CMU _____
 CTR _____
 EAG _____
 LEG _____
 LIN _____
 MPO _____
 RCU _____
 SDG 1 _____
 WAS _____
 OTH _____

Is your RETURN ADDRESS completed on the reverse side? 5

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 allow you to know when the article was delivered and the date delivered.

1. Addressee's Address
 2. Restricted Delivery
 Consult postmaster for fee.

3. Article Addressed to: 970839 4a. Article Number 47-0173

Richard L. GlassPoole-Barbara J. GlassPoole
 6310 S.W. 100th Loop
 Ocala FL 34476-8909

Certified
 Insured
 COD

Only if requested

6. Signature: (Addressing or Agent)
Richard L. GlassPoole

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

DOCUMENT NUMBER-DATE
08499 AUG 22 5
 FPSC-RECORDS/REPORTING