


010138-TX

0520-SC

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Received by (Please Print Clearly)	B. Date of Delivery
1. Article Addressed to:	C. Signature <i>ROBERTO OLIVERA</i> <input checked="" type="checkbox"/>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
World Telecommunications Services 28 West Flagler Street, Suite 708 Miami FL 33130-1894	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Copy from service label)	Express Mail Return Receipt for Merchandise C.O.D. <input type="checkbox"/> Extra Fee) <input type="checkbox"/> Yes	
7000 0600 0026 4194 3461	 010138-TX	

- APP \_\_\_\_\_
- CAF \_\_\_\_\_
- CMP \_\_\_\_\_
- COM \_\_\_\_\_
- CTR \_\_\_\_\_
- ECR \_\_\_\_\_
- LEG \_\_\_\_\_
- OPC \_\_\_\_\_
- PAI \_\_\_\_\_
- RCO \_\_\_\_\_
- SEC \_\_\_\_\_
- SER \_\_\_\_\_
- OTH \_\_\_\_\_

DOCUMENT NUMBER-DATE

04314 APR-65

FPSC-RECORDS/REPORTING