## **ORIGINAL**

HOEVED FISC

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CLERK

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <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  Color W  Agent  Addressee  D. Is delivery address different from item 1? Yes
1. Article Addressed to: 02 0 439/02c331	If YES, enter delivery address below:
Sanibel Bayous Utility Corporati 13591 McGregor Blvd., Suite 21 Ft. Myers FL 33919-6050	Service Type    Certified Mail   Express Mail   Registered   Return Receipt for Merchandise   Insured Mail   C.O.D.
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number 7002 (Transfer from service label)	0860 0001 1755 5449
PS Form 3811, March 2001 Domestic Ret	urn Receipt 102595-01-M-1424

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BOCOMENT PINELS - OVER

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