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 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery Is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front If space permits. 	A. Signature X (M (L) (Printed Name) Addressee B. Received by (Printed Name) C. Date of Delivery (HALITA UNA BI29/12) D. Is delivery address different from item 1? Yes If YES, enter delivery address below: DNo
Peace River Electric Cooperative Randall W. Shaw, General Manager/CEO P. O. Box 1310 210 Metheny Road	•
Wauchula, Florida 33873-1310	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
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PS Form 3811, February 2004 Domestic Ret	urn Receipt 102505-02

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