

ORIGINAL
COPY

910239-TC

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. Show to whom delivered, date, and addressee's address. (Extra charge)
2. Restricted Delivery (Extra charge)

3. Article Addressed to:
Force Technologies, Inc.
Attn: Douglas Reeder
3265 North West North Macedo Blvd.
Port St. Lucie, FL. 34983-1428

4. Article Number
78821

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee
Douglas Reeder

6. Signature - Agent
[Signature]

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

U.S. PERCE, FL MAIL OFFICE
MAY 14 1991
USPS

PS Form 3811, Apr. 1989 • U.S.G.P.O. 1989-238-515 DOMESTIC RETURN RECEIPT

ACK _____
AFA _____
APP _____
CAF _____
CMU _____
CTR _____
EAG _____
LEG _____
LIN _____
OPC _____
RCH _____
SEC 1 _____
WAS _____
OTH _____

DOCUMENT NUMBER-DATE

04872 MAY 16 1991

PSC-RECORDS/REPORTING