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Complete items 1 and 2 when additional services are desired, and complete items 3 through 7 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 restrictions for additional service(s) requested.

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

3. Article Addressed to: TECHNOLOGIES MANAGEMENT INC. ATTN: HAL STRINGER 1-63 EAST WOODBURY BLVD. MOUNTAIN VIEW, CA 94031	4. Article Number 79090
5. Signature - Addressee <i>Hal Stringer</i>	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
6. Signature - Agent <i>Cheryl Allen</i>	Always obtain signature of addressee or agent and DATE DELIVERED .
7. Date of Delivery <i>9/9/91</i>	8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Apr. 1989 •U.S.G.P.S. 1989-020-015 DOMESTIC RETURN RECEIPT

DOCUMENT NUMBER-DATE
 09031 SEP 11 1991
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