

<p><b>SENDER:</b></p> <ul style="list-style-type: none"> <li>• Complete items 1 and/or 2 for additional services.</li> <li>• Complete items 3, and 4a &amp; b.</li> <li>• Print your name and address on the reverse of this form so that we can return this card to you.</li> <li>• Attach this form to the front of the mailpiece, or on the back if space does not permit.</li> <li>• Write "Return Receipt Requested" on the mailpiece below the article number.</li> <li>• The Return Receipt will show to whom the article was delivered and the date delivered.</li> </ul>	<p>I also wish to receive the following services (for an extra fee):</p> <p>1. <input type="checkbox"/> Addressee's Address</p> <p>2. <input type="checkbox"/> Restricted Delivery</p> <p>Consult postmaster for fee.</p>
	<p>3. Article Addressed to: <b>960114</b></p> <p><b>Gary Ernest Isaac</b>  <b>6125 Duclay Forest Drive, South</b>  <b>Jacksonville FL 32244-5117</b></p>
<p>5. Signature (Addressee)</p> <p><i>[Signature]</i></p>	<p>7. Date of Delivery <b>3-20-96</b></p>
<p>6. Signature (Agent)</p> <p><i>[Signature]</i></p>	<p>8. Addressee's Address (Only if requested and fee is paid)</p>
<p>PS Form 3811, December 1991 ©U.S. GPO: 1992-352-714 <b>DOMESTIC RETURN RECEIPT</b></p>	

Is your RETURN ADDRESS related on the reverse side?

Thank you for using Return Receipt Service.

- ACK \_\_\_\_\_
- AFA \_\_\_\_\_
- APP \_\_\_\_\_
- CAF \_\_\_\_\_
- CMU \_\_\_\_\_
- CTR \_\_\_\_\_
- EAG \_\_\_\_\_
- LEG \_\_\_\_\_
- LIN \_\_\_\_\_
- OPC \_\_\_\_\_
- RCH \_\_\_\_\_
- SEC
- WAS \_\_\_\_\_
- OTH \_\_\_\_\_

DOCUMENT NUMBER-DATE  
**03366 MAR 21 96**  
 FPSC-RECORDS/REPORTING