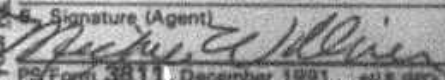


Is your RETURN ADDRESS completed on the reverse side?	<b>SENDER:</b> • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so that we can return this card to you. • Attach this form to the front of the mailpiece, or on the back if space does not permit. • Write "Return Receipt Requested" on the mailpiece below the article number. • The Return Receipt will show to whom the article was delivered and the date delivered.		I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
	3. Article Addressed to: <div style="border: 1px solid black; padding: 5px; display: inline-block;">           960350            Adtec Communications, Inc.            P. O. Box 727            Jacksonville IL 62651         </div>		4a. Article Number 96-0205	
		4b. Service Type <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		
		7. Date of Delivery 6-3-96		
Is your RETURN ADDRESS completed on the reverse side?	5. Signature (Addressee)		8. Addressee's Address (Only if requested and fee is paid)	
	6. Signature (Agent) 			
PS Form 3811, December 1991 • U.S. GPO 1995-082-714 <b>DOMESTIC RETURN RECEIPT</b>				

Thank you for using Return Receipt Service.

ACK \_\_\_\_\_  
 AFA \_\_\_\_\_  
 APP \_\_\_\_\_  
 CAF \_\_\_\_\_  
 CMU \_\_\_\_\_  
 CTR \_\_\_\_\_  
 EAG \_\_\_\_\_  
 LEG \_\_\_\_\_  
 LIN \_\_\_\_\_  
 OPC \_\_\_\_\_  
 RCH \_\_\_\_\_  
 SEC   1   \_\_\_\_\_  
 WAS \_\_\_\_\_  
 DTH \_\_\_\_\_

DOCUMENT NUMBER-DATE  
**06194 JUN-78**  
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