

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- 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.

Is your RETURN ADDRESS completed on the reverse side?

I also wish to receive the following services (for an extra fee):

- 1. Addressee's Address
 - 2. Restricted Delivery
- Consult postmaster for fee.

3. Article Addressed to:

961131

Mogens Moller
3439 N.E. 163rd Street
North Miami Beach FL 33160-4426

4a. Article Number

96-0297

4b. Service Type

- Registered
- Express Mail
- Return Receipt for Merchandise
- COD

Certified

7. Date of Delivery

1/25

5. Received By: (Print Name)

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

6. Signature (Addressee or agent)

[Handwritten Signature]

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

DOCUMENT NUMBER-DATE

12769 DEC-2 1994

FPSC-RECORDS/REPORTING