

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- 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 package, or on the back if space does not permit.
- Write "Return Receipt Requested" on the envelope below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

1. Also wish to receive the following services (for an extra fee):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

2. Article Number: 96325

3. Article Addressed to: 100943

Miller Food Store  
2974 Griffin Road  
Ft. Lauderdale FL 33312-5648

4b. Service Type

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

7. Date of Delivery: 11-25-91

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

6. Signature (Agent): [Signature]

Thank you for using Return Receipt Service.

PS Form 3811, December 1991 U.S. GPO: 1992-322-714

**DOMESTIC RETURN RECEIPT**

DOCUMENT NUMBER-DATE

12774 DEC-28

FPSC-RECORDS/REPORTING