

ORIGINAL
FILE COPY

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 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):

10 JAN 23

1. Addressee's Address

2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to: 970260

Ms. Nancy White
General Attorney
Bellsouth Telecommunications
675 W. Peachtree St, Room 4300
Atlanta, GA 30375

4a. Article Number
97-0007

4b. Service Type

Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

7. Date of Delivery
01/10/97 1/13/97

5. Signature (Addressee)

6. Signature (Agent)
Brenda Chapple

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

Thank you for using Return Receipt Service.

PS Form 3811, December 1991 *U.S. GPO: 1993-352-714

DOMESTIC RETURN RECEIPT

DOCUMENT NUMBER - DATE

00543 JAN 16 97

FPSC-RECORDS/REPORTING

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