ORIGINAL

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.

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: 921115

4a. Article Number 97-0244

4b. Service Type
☒ Certified
☐ Insured
☐ COD
☐ Return Receipt for Merchandise

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

ae America, Inc.
323 S.W. 66th Avenue
rtland OR 97223

10/08

Thank you for using Return Receipt Service.

PS Form 3811, December 1994 Domestic Return Receipt

ACK ____
AFA ____
APP ____
CAF ____
CMU ____
CTR ____
EAG ____
LEG ____
LIN ____
OPC ____
RCH ____
SEC 1
WAS ____
OTH ____

DOCUMENT NUMBER-DATE
10499 OCT 13 95
FPSC-RECORDS/REPORTING