

ORIGINAL

is your name...
printed on the reverse side?

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:

971122

4a. Article Number

97 1054

Compath Communications, Inc.
8220 East Gelding Drive
Scottsdale AZ 85260

- Certified
- Insured

Merchandise COD

10697

ees (Only if requested)

Signature of Addressee or Agent

X

[Handwritten Signature]

PS Form 3814, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

- ACK _____
- AFA _____
- APP _____
- CAF _____
- CMU _____
- CTR _____
- EPS _____
- LE _____
- LI _____
- LS _____
- LT _____
- LN _____
- LP _____
- LR _____
- LS _____
- LT _____
- LN _____
- LP _____
- LR _____

DOCUMENT NUMBER-DATE

10501 OCT 13 6

FPSC-RECORDS/REPORTING