

Read 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: 97118

4a. Article Number 97-0247

Anchor Communications Corporation  
 Mr. Dennis Wilson  
 4910 14th Street West, Suite 300  
 Bradenton FL 34207-2404

Certified  
 Insured  
 Merchandise  COD

OCT 9 1997  
 Express (Only if requested)

6. Signature: (Addressee or Agent)  
[Signature]

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Services.

DOCUMENT NO  
 10657-97  
 10-14-97