

ORIGINAL

1535

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: 981124
 Mohamed ~~Mohamed~~ Mohamed
 4521 Three Lakes Circle
 Orlando FL 32808-2027

4a. Article Number 98-1205

Certified
 Insured
 COD

DEC 10 1938
 USPS 32818
 Only if requested

Signature: [Handwritten Signature]
 (Addresssee or Agent)

PS Form 3811, December 1984 Domestic Return Receipt

RETURN ADDRESS (Print name and address on the reverse side)

Thank you for using Return Receipt Service.

- ACK _____
- AFA _____
- APP _____
- CAF _____
- OWI _____
- OTR _____
- EAG _____
- LE _____
- LI _____
- TI _____
- Y _____
- I _____
- _____
- _____

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