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 I also wish to receive the following services (for an Is your RETURN ADDRESS completed on the reverse extra fee): Attach this form to the front of the mailpiece, or on the back if space does not Receipt Service 1. Addressee's Address 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 2. D Restricted Delivery delivered. Consult postmaster for fee. 3. Article Addressed to: 4a. Article Number 1438 9 8 G  $\mathcal{O}$ 708 Thank you for using Return Bestel, Inc. Certified David Corsair 🔲 Insured 5557 West Oakland Park, Suite 314 rchandise 🗖 ÇOD Lauderhill FL 33313-1411 is (Only if fequested 6. Signatur (Addressee or Agent) Х PS Form 3811, December 1994 Domestic Return Receipt

DOCUMENT NUMBER-DATE

UT324 FEB-38

FPSC-RECORDS/REPORTING

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- ACK \_\_\_\_
- APP \_\_\_\_\_
- CAF \_\_\_\_\_
- CMU \_\_\_\_\_
- CTR \_\_\_\_\_
- LEG \_\_\_\_\_
- LIN \_\_\_\_
- OPC \_\_\_\_\_
- RCH \_\_\_\_\_
- SEC \_\_\_\_
- WAS \_\_\_\_\_
- OTH \_\_\_\_\_