

0420

Deleted 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:

981781

4a. Article Number

99226

North Fort Myers Utility, Inc.  
 P. O. Box 2547  
 Fort Myers FL 33902-2547

- Certified
- Insured

Merchandise  COD

3-22-99  
 Price (Only if requested)

Is your

6. Signature (Addressee or Agent)

X *[Handwritten Signature]*

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

- ACK \_\_\_\_\_
- AFA \_\_\_\_\_
- APP \_\_\_\_\_
- CAF \_\_\_\_\_
- CMU \_\_\_\_\_
- CTR \_\_\_\_\_
- ENG \_\_\_\_\_
- LSG \_\_\_\_\_
- LN \_\_\_\_\_
- OPC \_\_\_\_\_
- RCR \_\_\_\_\_
- SE. 1
- WAS \_\_\_\_\_

DOCUMENT NUMBER-DATE

03872 MAR 25 8

FPSC-RECORDS/REPORTING