

ORIGINAL  
FILE COPY

1110.

Is your RETURN ADDRESS completed 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: 990424  
 CSI  
 Robin Packo  
 4475 U.S. 1 South, #100  
 St. Augustine FL 32086-7200

4a. Article Number 99-148

- Certified
- Insured
- Merchandise  COD

6-4-95  
 is (Only if requested)

6. Signature: (Addressee or Agent)  
X *James G...*

PS Form 3841, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

- AFA \_\_\_\_\_
- APP \_\_\_\_\_
- CAF \_\_\_\_\_
- CMU \_\_\_\_\_
- CTR \_\_\_\_\_
- EAG \_\_\_\_\_
- LEG \_\_\_\_\_
- MAS \_\_\_\_\_
- OPC \_\_\_\_\_
- RRR \_\_\_\_\_
- SEC \_\_\_\_\_
- WAW \_\_\_\_\_
- OTH \_\_\_\_\_

DOCUMENT NUMBER-DATE

06983 JUN-7 95

FPSC RECORDS/REPORTING