

ed 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:

~~770821~~

4a. Article Number

99-200

2001 Telecommunications, Inc.  
 5373 North Dixie Highway  
 Oakland Park FL 33334-3403

990630

Certified

Insured

Merchandise  COD

8/16/99

POST (Only if requested)

is your RE

6. Signature: (Addressee or Agent)

X

*[Handwritten Signature]*

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

- AFA
- APP
- CAF
- CMU
- CTR
- EAG
- LEG
- MAS
- OPC
- PAI
- SEC
- WAW
- OTH

DOCUMENT NUMBER-DATE

09945 AUG 19 98

FPSC-RECORDS/REPORTING