ORIGINAL

2092

ted 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: 991080

4a. Article Number 99-

General Pay Phones, Inc.
Julio Piloto
3012 N.W. 2nd Avenue
Miami FL 33127-3529

e

☐ Certified
il ☐ Insured
t for Merchandise ☐ COD

ery 10-25-99

Address *(Only if requested*
aid)

Is your RE

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

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
13297 OCT 29 99
FPSC-RECORDS/REPORTING