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 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.	1. Addressee's Address 2. Restricted Delivery
3. Article Addressed to: Vernie R. & Shemanne K. Spicer 615 Morgan Road, N.E. Charleston TN 37310 Vernie Spicer	99 - 389
Vernie R. & Shemanne K. Spicer 615 Morgan Road, N.E. Charleston TN 37310	Certified Insured
Vernie Spicer	12-28-9 (Only if requested
6. Signature: (Addressee or Agent) X PS Form 3811, December 1994	Domestic Return Recei

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