

ORIGINAL

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:

000113-TC

4a. Article Number

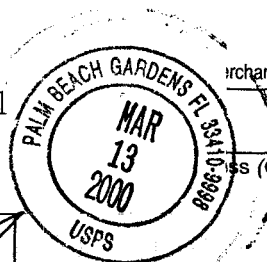
00-77.

MareTel
 Michael Kofod
 P. O. Box 32721
 Palm Beach Gardens FL 33420-2721

- Certified
- Insured
- COD

Merchandise

Postage (Only if requested)



6. Signature (Addressee or Agent)

Michael Kofod

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

AFA _____
 APP _____
 CAF _____
 CAN _____
 CTR _____
 EAG _____
 LEG _____
 MAS _____
 OPC _____
 RRR _____
 SEC _____
 WAW _____
 OTH _____

DOCUMENT NUMBER-DATE

03501 MAR 17 8

FPSC-RECORDS/REPORTING