

0822 - PAA

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: 092009

4a. Article Number 00-179

Sunshine Shell
 Reuven Zfat
 880 West Sunrise Blvd.
 Ft. Lauderdale FL 33311-7240

- Certified
- Insured
- COD

or Merchandise
y

address (Only if requested
)

Is your BE

6. Signature: (Addressee or Agent)

X [Signature]

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

- AFA _____
- APP _____
- CAF _____
- CMW _____
- GTR _____
- EAG _____
- LEG _____
- MAS _____
- OPC _____
- RRR _____
- SEC _____
- WAW _____
- OTH _____

DOCUMENT NO.
 05535-00
 5/3/00.