

ORIGINAL

2116-PAA

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Received by (Please Print Clearly)	B. Date of Delivery
1. Article Addressed to:	Michael Rankin	11/17/00
<p style="text-align: right; color: red;">0011 87</p> <p>Talon Enterprises, Inc. Michael K. Rankin 3406 Yale Circle Riverview FL 33569-4221</p>	C. Signature	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
2. Article Number (Copy from service label)	<input checked="" type="checkbox"/> If YES, enter delivery address below:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p style="text-align: center; color: red; font-size: 1.2em;">7000 0600 00 26 4145 4993</p>	<input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> C.O.D. <input type="checkbox"/> Extra Fee <input type="checkbox"/> Yes	
PS Form 3811, July 1999	Domestic Return Receipt	102595-99-M-1789

- APP _____
- CAF _____
- CMP _____
- COM _____
- CTR _____
- EGR _____
- LEG _____
- OPC _____
- PAI _____
- RGO _____
- SEC 1
- SER _____
- OTH _____

DOCUMENT NUMBER-DATE
15017 NOV 20 08
EPSC-RECORDS/REPORTING