

ORIGINAL

001469-TX  
0464-PAA

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mail piece, or on the front if space permits.</li> </ul>	A. Received by (Please Print Clearly)	B. Date of Delivery
	C. Signature	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No	

1. Article Addressed to:

FreedomTel, Inc.  
David Gillette  
9100 Hamman Street  
Pensacola FL 32514-7020

001469-TX

Express Mail  
Return Receipt for Merchandise  
C.O.D.  
(Extra Fee)  Yes

2. Article Number (Copy from service label)

7000 0600 0026 4144 3522

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

APP \_\_\_\_\_  
 CAF \_\_\_\_\_  
 CMP \_\_\_\_\_  
 COM \_\_\_\_\_  
 CTR \_\_\_\_\_  
 ECR \_\_\_\_\_  
 LRG \_\_\_\_\_  
 OFO \_\_\_\_\_  
 PAI \_\_\_\_\_  
 RCF \_\_\_\_\_  
 SCS \_\_\_\_\_  
 TSP \_\_\_\_\_

DOCUMENT NUMBER-DATE

02875 MAR-56

POSTAGE WILL BE PAID BY ADDRESSEE