

01-0556-900

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) <u>C. Roberts</u>	B. Date of Delivery <u>4-23</u>
1. Article Addressed to:	C. Signature <u>X C. Roberts</u> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee	
<p>U.S. Paytel, Inc. Ed Otto 8247 Hascall Omaha NE 68124-3233</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below. <input checked="" type="checkbox"/> No</p> <p style="text-align: right;"><u>001653-TC</u></p> <p>Express Mail Return Receipt for Merchandise C.O.D. <input type="checkbox"/> Extra Fee) <input type="checkbox"/> Yes</p>	
2. Article Number (Copy from service label)	<u>7000 0600 0026 4144 8886</u>	
PS Form 3811, July 1999	Domestic Return Receipt	102595-99-M-1789

05271 APR 27 1999

DOCUMENT NUMBER-DATE
05271 APR 27 99

POSTAGE WILL BE PAID BY ADDRESSEE