

ORIGINAL

Printed 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: 011025.

4a. Article Number

eGlobe, Inc.
1250 24th Street N.W., #725
Washington DC 20037-1226

PSC-01-2217-CO-TI

Certified

Insured

or Merchandise COD

12/21/01
Address (Only if requested)

Thank you for using Return Receipt Service.

Is your R

6. Signature (Addressee or Agent)

PS Form 3811, December 1994

Domestic Return Receipt

APP
CAF
CMP
COM
CTR
ECR
LEG
OPC
PAI
RGO
SEC
SER
OTH

DOCUMENT NUMBER-DATE

16163 DEC 28 05

FPSC-COMMISSION CLERK