

ORIGINAL

SENDER: COMPLETE THIS SECTION

- 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.

1. Article Addressed to: 020660

Mr. Stuart Blitz
 Call 4-Less
 1415 West Cypress Creek Road, #220
 Ft. Lauderdale, FL 33309-1955

2. Article Number
 (Transfer from service label)

7002 0860 0001 1755 4770

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

F Webster 11/4/02

C. Signature

F Webster

- Agent
- Addressee

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type

- Certified Mail Express Mail
- Registered Return Receipt for Merchandise
- Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

AUS _____
 CAF _____
 CMP _____
 COM _____
 CTR _____
 ECR _____
 GCL _____
 OPC _____
 MMS _____
 SEC L
 OTH _____

DOCUMENT NUMBER DATE

12512 NOV 15 02

FPSC-COMMISSION CLERK