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 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 Ofean) B. Date of Delivery C. Signature X Agent D. Is delivery address different from item 1? Yes
1. Article Addressed to: 020(39) ibel Bayous Utility Corporation Old McGregor Blvd., Suite 21 Myers FL 33919-6050	If YES, enter delivery address below:
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<u> </u>	4. Restricted Delivery? (Extra Fee) ☐ Yes
Article Number (Transfer from service label)	
PS Form 3811, March 2001 Domestic Ret	urn Receipt 102595-01-M-14

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