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<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. Signature x  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: 130000-OT DN03336-11	B. Received by (Printed Name) Yvonne Osorio	C. Date of Delivery 12-2013
MARVA BROWN JOHNSON BRIGHT HOUSE NETWORKS INFORMATION SERVICES (FLORIDA) LLC ORLANDO CORPORATE OFFICE 301 E PINE ST STE 600 ORLANDO FL 32801-2755	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
2. Article Number (Transfer from service label)	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes 7011 3500 0001 5979 4486	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540		