

981556

Enter 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:

981556

4a. Article Number

99-146

FCI
 SOMKID pUNMA
 3455 Sunny Isles Blvd.
 North Miami Beach FL 33160-4426

- Certified
- Insured

Merchandise COD

2/13

ress (Only if requested)

Thank you for using Return Receipt Service.

Is your

6. Signature (Addressee or Agent)

[Handwritten Signature]

PS Form 3811, December 1994

Domestic Return Receipt

- ACK _____
- AFA _____
- APP _____
- CAF _____
- CMU _____
- CTR _____
- EAG _____
- LEG _____
- LIN _____
- OPC _____
- RCH _____
- SEC |
- WAS _____
- OTH _____

DOCUMENT NUMBER-DATE

02175 FEB 18 98

FPSC-RECORDS/REPORTING