

ORIGINAL

2446

**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.

991699

I also wish to receive the following services (for an extra fee):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

99-408

Certified  
 Insured  
 erchandise  COD

Sunshine Coin Laundry  
 P. O. Box 3189  
 Vero Beach FL 32964

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)  
 X *Norman High*

VERO BEACH, FL BEACH STA  
 DFC  
 21  
 1000  
 USPS

PS Form 3811, December 1994

Domestic Return Receipt

is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

- AFA \_\_\_\_\_
- APP \_\_\_\_\_
- CAF \_\_\_\_\_
- CNUJ \_\_\_\_\_
- CTR \_\_\_\_\_
- EAG \_\_\_\_\_
- LEG \_\_\_\_\_
- MAS \_\_\_\_\_
- OPC \_\_\_\_\_
- RRR \_\_\_\_\_
- SEC   T
- WAW \_\_\_\_\_
- OTH \_\_\_\_\_

DOCUMENT NUMBER-DATE  
 15719-DEC 23 8  
 FPSC-RECORDS/REPORTING