## ORIGINAL

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 card to you.  Attach this form to the front of the mailpiece, or on the back if space permit.  Write *Teturn Receipt Requested** on the mailpiece below the article The Return Receipt will show to whom the article was delivered and delivered.	e does not e number. d the date	I also wish to receive the following services (for an extra fee):  1.  Addressee's Address 2.  Restricted Delivery Consult postmaster for fee.	ceipt Service.
eted	3. Article Addressed to:	4a. Article N	umber	Return Re
뮵	Direct Net Telecommunications	4b. Service	Гуре	eţ
8	Sandy Hunter	Registere		
SS	4400 MacArthur Blvd., Suite 410	☐ Express t	Mail 🔲 'Insured .	using
띩	Newport Beach CA 92660-2035	☐ Return Red	celbit for interchancine - COD	_
힑		7. Date of De		ē
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Ë		8. Addressee and fee is	e's Address (Only if requested paid)	rhank you
is your RETURN ADDRESS completed on	6. Signature: (Addressee or Agent)  X GONZALIE 2			_
	PS Form <b>3811</b> , December 1994		Domestic Return Receipt	

DOCUMENT NUMBER-DATE

15816 DEC 195