

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 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:

982019

4a. Article Number

99-0034

J & G Communications
 Jack Brooks
 P. O. Box 24048
 Tampa FL 33623-4048
 4041 JEWETT DR
 SPANGLHILL, FL 34603

- Certified
- Insured

Merchandise COD

4-26-99

Address (Only if requested)

In your BEST

6. Signature: (Addressee or Agent)

[Handwritten Signature]

PS Form 3871, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

- AFA _____
- APP _____
- CAF _____
- CMU _____
- CTR _____
- EAG _____
- LEG _____
- MAS _____
- OPC _____
- RRR _____
- SEC I
- WAW _____
- OTH _____

DOCUMENT NUMBER-DATE

05421 APR 28 8

FPSC-RECORDS/REPORTING