

ORIGINAL

0673-5C

Is your RETURN ADDRESS completed 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:

000215

4a. Article Number

00-156

Smart City Networks
28 West Grand Avenue
Montvale NJ 07645

- Certified
- Insured
- COD

Indorse

4-13

(Only if requested)

6. Signature (Addressee or Agent)

X *[Signature]*



PS Form 3811, December 1994

10250-98, 5-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

- AFA _____
- APP _____
- CAF _____
- CMW _____
- CTR _____
- EAQ _____
- LEG _____
- MAS _____
- OPC _____
- RRR _____
- SEC _____
- WAW _____
- OTH _____

DOCUMENT NUMBER-DATE

04713 APR 17 8

FPSC-RECORDS/REPORTING