

Signed Certified Letter Card 1727

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 card to you.	! also wish to receive the following services (for an extra fee):
■Print your name and address on the reverse of this form so that we can return card to you. ■Attach this form to the front of the mailpiece, or on the back it space does not permit.	1. Addressee's Address
Write "Return Receipt Requested" on the mailpiece below the article number.	2. Restricted Delivery
■The Return Receipt will show to whom the article was delivered and the date delivered.	Consult postmaster for fee.
3. Article Addressed to: 4a. Artic	le Number 229564930
4-069-0326A-ERP 2/13/96 LERNAR ACTIVE ADULT COMMUNITIES ATTN MARSHALL AMES 1110 DOUGLAS AVENUE ALTAMONTE SPRINGS FL 32714	Certified Insured for Merchandise COD
	asses's Address (Only if requested
PS Form 3811 , December 1994	Domestic Return Receipt