



**Signed Certified
Letter Card**

1727

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:

4-069-0326AM2-ERP 8/12/97
 LENNAR ACTIVE ADULT COMMUNITIES
 ATTN MARSHALL AMES
 1110 DOUGLAS AVENUE
 ALTAMONTE SPRIN FL 32714

4a. Article Number

P182-699845

4b. Service Type

- Registered Certified
- Express Mail Insured
- Return Receipt for Merchandise COD

7. Date of Delivery

7/30/97

5. Received By: (Print Name)

PAUL H. CRAWFORD

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

6. Signature: (Addressee or Agent)

* Crawford

A. Crawford

Thank you for using Return Receipt Service.