



# Signed Certified Letter Card

1727

Is your RETURN ADDRESS completed on the reverse side?

42-069-1391 ANG-ERP

n. brany

**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.

North Hancock Rd

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:

Mr. Paul W. Yeargou  
 VHB, Inc.  
 135 W. Central Blvd - Suite 1150  
 Orlando, FL 32801-2436

REGISTERED  
 FEB 27 1999

4. Article Number

02 315271296

4a. Service Type

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

7. Date of Delivery

3-30-99

5. Received By: (Print Name)

D. Gibson

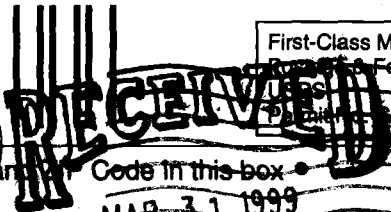
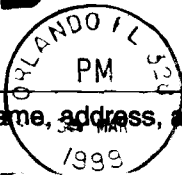
6. Signature: (Addressee or Agent)

X

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

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. 3-10

• Print your name, address, and ZIP Code in this box •

MAR 31 1999

PDS  
ORLANDO  
SJR WMD

St. Johns River Water Management District  
618 E. South Street, Suite 200  
Orlando, Florida 32801

