



# Signed Certified Letter Card

1727

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mr. Paul W. Yeargain, P.E.  
 VHB, Inc.  
 135 W. Central Blvd., #800  
 Orlando, FL 32801-2436

2. Article Number (Copy from service label)

7099 3220 0006 4678 0317

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

40-009-50126-3

N. Hancock Rd.

M. COOK

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly)

B. Date of Delivery

6/25

C. Signature

x Elaine James

 Agent Addressee

D. Is delivery address different from item 1?

 Yes

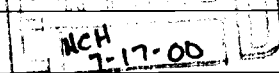
If YES, enter delivery address below:

 No

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

 Yes

UNITED STATES POSTAL SERVICE



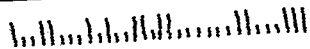
First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

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

**RECEIVED**

JUL 12 2000



PDS  
ORLANDO  
SJR WMD

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
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1. Article Addressed to:

Mr. Paul W. Yeargain, PE  
 V# B, Inc.  
 135 W. Central Blvd #800  
 Orlando, FL 32801-2436

P

2. Article Number (Copy from service label)

7099-3220-0006-8660-4802

PS Form 3811, July 1999

40-069-50126-3

Domestic Return Receipt

N. Hancock Rd #2

102595-00-M-0952

m. Cook

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly)

B. Date of Delivery

8-31-00

C. Signature

x *Elaine Jones*

 Agent Addressee

D. Is delivery address different from item 1?

 Yes

If YES, enter delivery address below:

 No

ENTERED  
 QB 7/13

Access

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

 Yes

UNITED STATES POSTAL SERVICE



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

• Sender: Please print your name, address, and ZIP+4 in this box •

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

**RECEIVED**  
SEP 05 2000

PDS  
ORLANDO  
SJR WMD.