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: 7-23-01

* 00-156
John McVeigh
12101 Blue Paper Trail
Columbia, MD 21044-2787

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly): J.J. McVeigh
B. Date of Delivery: 27 JULY 2001

C. Signature: X J.J. McVeigh
☐ 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

Article Number (Copy from service label) 0023 0769 1616 13

Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

DOCKET NO. 00-156

ORDER DATED 7-23-01
FCC 01M-26
MIMEOGRAPH NO.

CERTIFIED MAIL

RETURN RECEIPT REQUESTED

NAME: John McVeigh
12101 Blue Paper Trail
Columbia, MD 21044-2787

C. R. R. NO.

BY

FCC Form 55 May 1990