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: 11-14-01

* 00-156

Michael L. Higgs, Jr.
Schwaninger & Associates, P.C.
1331 H Street, N.W.
Suite 500
Washington, DC 20005

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly): Anne Hamilton
B. Date of Delivery: 11-28-01

C. Signature: X Anne Hamilton
☐ 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

2. Article Number (Copy from service label) 0023 8168 5862

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

DOCKET NO. 00-156

ORDER DATED 11-14-01
FCC 01 14-01
MIMEOGRAPH NO.

CERTIFIED MAIL

RETURN RECEIPT REQUESTED

NAME: Michael L. Higgs, Jr. C. R. R. NO.
1331 H Street, N.W., Suite 500
Washington, DC 20005 BY

FCC Form 55 May 1990

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

Article Sent To:

Postage	$ .34
Certified Fee	2.10
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	1.50
Total Postage & Fees	$ 3.94

Postmark Here: CHAMPION PK FIN UNIT CAPITAL HGTS MD NOV 27 2001 USPS-20791

00-156 11-14-01

7000 0600 0023 8168 5862

Name (Please Print Clearly) (to be completed by mailer): Michael L. Higgs, Jr.
Street, Apt. No.; or PO Box No.: 1331 H Street, NW, Suite 500
City, State, ZIP+4: Washington, DC 20005