SENDER: C[redacted]ON ON DELIVERY

- 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: 11-12-02

* 01-348
Edward P. Henneberry
Howery Simon Arnold & White, LLP
1299 Pennsylvania Avenue, N.W.
Washington, DC 20004

A. Received by (Please Print Clearly) Gary Gingras
B. Date of Delivery 11/26/02
C. Signature
X Gary Gingras
☑ 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 0771 3365

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

DOCKET NO. 01-348

ORDER DATED
11-12-02

FCC 02M-102
~~MIMEOGRAPH NO.~~
~~MIMEOGRAPH NO.~~:

CERTIFIED MAIL

RETURN RECEIPT REQUESTED

NAME: Edward P. Henneberry
1299 Pennsylvania Avenue N.W
Washington, DC 20004

[illegible] NO.

RECEIVED & INSPECTED
NOV 20 2002
BY
FCC-MAILROOM

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

7000 0600 0023 0771 3365

Article Sent To:

Postage	$ .37
Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 4.42

11-12-02
01-348

Postmark Here
HAMPTON PK FINCUNIT CAPITAL HGTS
NOV 20 2002
MD-USPS-20203

Name (Please Print Clearly) (to be completed by mailer)
Edward P. Henneberry
Street, Apt. No.; or PO Box No.
1299 Pennsylvania Avenue, N.W
City, State, ZIP+4
Washington, DC 20004

PS Form 3800, July, 1999 See Reverse for Instructions