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. 11-18-02

* 01-348
Barry D. Wood
Wood, Maines & Brown
1827 Jefferson Place, N W
Washington, DC 20036

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) | B Date of Delivery

C Signature
X MKCabral ☐ 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 3129

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

DOCKET NO. 01-348

ORDER DATED 11-18-02
FCC 02M-103 / 02M-104
MIMEOGRAPH NO.

CERTIFIED MAIL

RETURN RECEIPT REQUESTED

RECEIVED & INSPECTED
NOV. 2 2002
FCC-MAILROOM
BY

NAME: Barry D. Wood
Wood, Maines & Brown
1827 Jefferson Place, N.W
Washington, DC 20036

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

7000 0600 0023 0771 3129

Article Sent To

Postage	$ 60
Certified Fee	230
Return Receipt Fee (Endorsement Required)	175
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 4.65

11-18-02
01-348
Postmark Here

C4-C203

Name (Please Print Clearly) (to be completed by mailer)
BARRY D. WOOD
Street, Apt. No.; or PO Box No.
1827 JEFFERSON PLACE, N.W
City, State, ZIP+4
WASHINGTON, DC 20036

PS Form 3800, July 1999 See Reverse for Instructions