

7007 0220 0001 7324 7664

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

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Post	

10/3/07

Sent To
 Street, Apt.
 or PO Box
 City, State

7007 0220 0001 7324 7664
 MS LINDA DUNWOODY OPS MGR
 VEOLIA ENVIRONMENTAL SERVICES
 TECHNICAL SOLUTIONS LLC
 342 MARPAN LANE TALLAHASSEE FL 32305

PS Form 3800, August 2005

Postmark
 Here

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:

7007 0220 0001 7324 7664
 MS LINDA DUNWOODY OPS MGR
 VEOLIA ENVIRONMENTAL SERVICES
 TECHNICAL SOLUTIONS LLC
 342 MARPAN LANE TALLAHASSEE FL 32305

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

LINDA DUNWOODY

C. Date of Delivery

10/18/07

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

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Wade/Hw/m

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540