

P 174 179 244

US Postal Service

Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to

Nick Marotta Wm 1

Street & Number

3000 NW 48 Street

Post Office, State, & ZIP Code

Pompano Bch 33073

Postage

Certified Fee

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom & Date Delivered

Return Receipt Showing to Whom, Date, & Addressee's Address

TOTAL Postage & Fees

\$

Postmark or Date

JL/dc(SW)4/17/97

Re: Rinker - intent
5013-300512

PS Form 3800, April 1995

SENDER:

- ☐ Complete items 1 and/or 2 for additional services.
☐ Complete items 3, 4a, and 4b.
☐ Print your name and address on the reverse of this form so that we can return this card to you.
☐ Attach this form to the front of the mailpiece, or on the back if space does not permit.
☐ Write "Return Receipt Requested" on the mailpiece below the article number.
☐ The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
 2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Nick Marotta
 WMI
 3000 NW 48 Street
 Pompano Bch, FL 33073

4a. Article Number

P174179244

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

4-22-97

5. Received By: (Print Name)**8. Addressee's Address (Only if requested and fee is paid)****6. Signature: (Addressee or Agent)**

X

M. Adams

UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

o Print your name, address, and ZIP Code in this box o

(Lurix, SW)

F.D.E.P., SOUTHEAST DISTRICT

P.O. BOX 15425

WEST PALM BEACH FL 33416

RECEIVED

APR 28 1997

DEPT OF ENV PROTECTION
WEST PALM BEACH

