

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:

Pacific Broadcasting Group, Inc.
 P.O. Box 940
 Newton, NC 28658

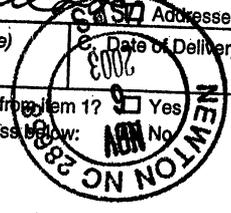
2. Article Number
 (Transfer from service label)

7003 0500 0001 4020 4896

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Handwritten Signature]* Agent
 Addressee

B. Received by (Printed Name) _____



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

PS Form 3811, August 2001

Domestic Return Receipt

2ACPRI-03-P-4081

UNITED STATES POSTAL SERVICE



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

• Sender: Please print your name, address, and ZIP+4 in this box •

Gary S. Smithwick, Esquire
 Smithwick & Belendiuk, P.C.
 5028 Wisconsin Avenue, N.W., #301
 Washington, D.C. 20016

