

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

7000 2870 0000 7027 5029

OFFICIAL USE

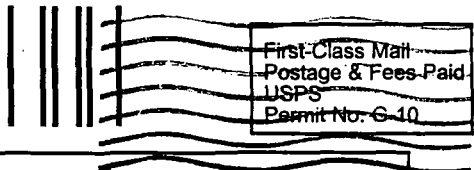
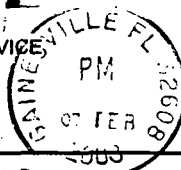
Postage	\$	<i>[Handwritten Signature]</i>	Postmark Here
Certified Fee			
Return Receipt Fee (Endorsement Required)			
Restricted Delivery Fee (Endorsement Required)			

Total Postage AIRS ID#0010106

Sent To SUBURBAN CLEANERS #1
JOHN W EVERSON
402 NW 13TH STREET
GAINESVILLE FL
23605

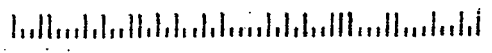
PS Form 3800, May 2000 See Reverse for Instructions

UNITED STATES POSTAL SERVICE



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

DARM/MOBILE SOURCE CONTROL PROGRAM
 DEPT. OF ENVIRONMENTAL PROTECTION
 MAIL STATION 5510
 2600 BLAIR STONE ROAD
 TALLAHASSEE, FLORIDA 32399-2400



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:

AIRS ID#0010106

SUBURBAN CLEANERS #1
 JOHN W EVERSON
 402 NW 13TH STREET
 GAINESVILLE FL
 23605

2. Article Number
 (Transfer from service label)

7000287000070275029

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) *Kathleen Pennock* B. Date of Delivery *2/17/03*

C. Signature *X Kathleen Pennock* Agent Addressee

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes