

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (<i>Printed Name</i>) C. Date of Delivery</p>
<p>1. Article Addressed to: <i>DEO ADN Pack</i> Ray Eubanks, Plan Review and Processing Admin. State Land Planning Agency Department of Economic Opportunity Caldwell Building 107 East Madison Street MSC 160 Tallahassee, FL 32399-4120</p> <p><i>CPA 2013-08 Estero Apts.</i></p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <i>If YES - enter delivery address below:</i> <input type="checkbox"/> No</p> <p style="text-align: center;">RECEIVED <i>DEO Mail Center</i> JUN 30 2014</p> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input checked="" type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (<i>Extra Fee</i>) <input type="checkbox"/> Yes</p>
<p>2. Article Number <i>(Transfer from service label)</i> 7007 0710 0005 1079 7225</p>	