

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:

Mr. Eric M. Sherman
 Family Dollar Services
 10401 Old Monroe Drive
 Matthews, North Carolina 28201

2. Article Number

(Transfer from service label)

7001 0320 0005 8921 6518

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date **JAN 03 2003**

C. Signature

X MARCUS DALE Agent Addressee

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

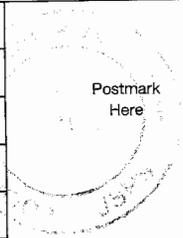
**U.S. Postal Service
CERTIFIED MAIL RECEIPT**

(Postage and Insurance Coverage Provided)

Sonja Brooks- Woodard E-13J

OFFICIAL USE

Postage	\$ 4.3
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 9.20



Sent To Mr. Eric M. Sherman
 Family Dollar Services
 Street, Apt. No., or PO Box No. 10401 Old Monroe Drive
 City, State, ZIP+4 Matthews, North Carolina 28201

PS Form 3800, January 2001

See Reverse for Instructions

7001 0320 0005 8921 6518