State of Florida

Public Service Commission

Florida Public Service Commission
Division of Records and Reporting
2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850

☐ NO ... NUMBER
☐ NO MAIL RECEPTACLE
ATTEMPTED NOT KNOWN
☐ MOVED LEFT NO FORWARD
NO SUITE #
FORWARDING ORDER EXP.
ROUTE NO. ____ INITIALS ____ DATE ____

5-22-97

Donna O. Broady
2300 North Surf Road
Hollywood FL 33019-3518

NAME
1st Notice
2nd Notice 5-07
Return 010

CERTIFIED MAIL
Return Receipt Requested
No. 97-0100

Is your RETURN ADDRESS completed on the reverse?

- 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: 970407

Donna O. Broady
2300 North Surf Road
Hollywood FL 33019-3518

4a. Article Number: 97-0100

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)
X

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

ENQUIRY NO. 05948-97
06/10/97

ORIGINAL
FILE COPY