

ORIGINAL

D 1750

AUG - 3 PM 12: 01

COMMISSION CLERK

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: 040426

Foxtel, Inc.  
333 Holcomb Avenue, Suite 200  
Reno NV 89502-1674

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

3. Service Type
- Certified Mail  Express Mail
  - Registered  Return Receipt for Merchandise
  - Insured Mail  C.O.D.
4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number  
(Transfer from service label)

7002 0860 0001 1758 7709

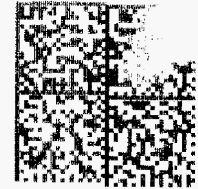
Return Receipt

102595-01-M-1424

Public Service Commission

2540 Shumard Oak Boulevard  
Tallahassee, Florida 32399-0850

7002 0860 0001 1758 7709



Postnet

Foxtel, Inc.  
333 Holcomb Avenue, Suite 200  
Reno NV 89502-1674

US PO Mailed From 07/15 \$04 047K

FOXT333 895022018 1003 04 07/23/04  
RETURN TO SENDER  
:FOXTEL INC  
MOVED LEFT NO ADDRESS  
UNABLE TO FORWARD  
RETURN TO SENDER

32399X0850-01



PAA Order No. PSC-04-0696-PAA-TX

CMP COM CTR ECR GCL OPC MMS RCA SCR SEC OTH

DOCUMENT NUMBER - DATE

08392 AUG - 3 0

FPSC - COMMISSION CLERK