

ORIGINAL

RECEIVED - FPSC

06 SEP 18 AM 9:31

COMMISSION
CLERK

060465-TC

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:

060465-TC

Mintesnot Hailemariam
2315 Cypress Cove Drive
Tallahassee, FL 32310-6347

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
X Addressee

B. Received by (Printed Name) C. Date of Delivery

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

2. Article Number

7005 1160 0003 8789 5956

(Transfer from service label)

State of Florida

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

Public Service Commission

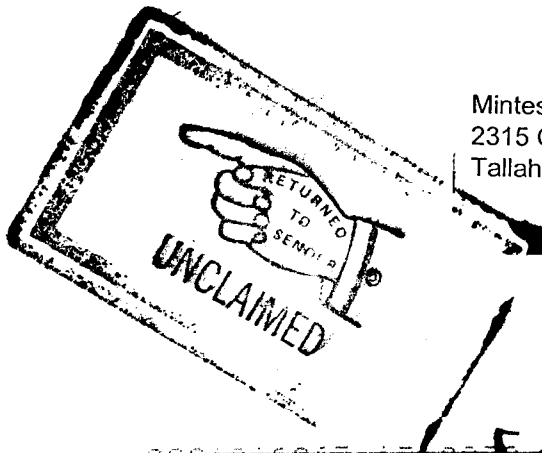
2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850



7005 1160 0003 8789 5956



SEP 15 2006
Mailed From 32399
US POSTAGE



Mintesnot Hailemariam
2315 Cypress Cove Drive
Tallahassee, FL 32310-6347

FIRST NOTICE
5-16-06
SECOND NOTICE
8-26-06
RETURN
8-31-06

8/16/06

DOCUMENT NUMBER DATE

08541 SEP 18 08

FPSC-COMMISSION CLERK

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