

State of Florida

Public Service Commission

Fletcher Building, 101 East Games Street
Tallahassee, Florida 32309-0830



Colin Howard Hall
1000 S.W. 62nd Blvd., Apt. 1134
Gainesville FL 32607-2083

N. - 96 419

Is your RETI

6. Signature (Agent) _____

PS Form **3811**, December 1991 e.u.s. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service

SENDER:

- Complete items 1 and or 2 for additional services.
- Complete items 3, and 4a & b.
- 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.

3. Article Addressed to: 961317 4a. Article Number 96-419

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1. Addressee's Address

2. Restricted Delivery

Consult postmaster for fee.

type Insured COD Return Receipt for Merchandise Delivery

1's Address (Only if requested paid)

ed on the reverse side?

RECEIVED
DEC 16 1991
11:04 AM