

State of Florida

Florida Public Service Commission
Division of Records & Reporting
2540 Shumard Oak Blvd.
Tallahassee, Florida 32301



MOVED, LEFT NO ADDRESS
FORWARDING ORDER EXPIRED
ATTEMPTED NOT KNOWN
UNCLAIMED REFUSED
NO SUCH STREET
NO SUCH ZIP CODE

National Independent Carrier Exchange, Inc.
6 West Main Street
Freehold NJ 07728

MLNF
C-1 JF

CERTIFIED MAIL
Return Receipt Requested
No. 97-0035



Read on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- 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:

National Independent Carrier Exchange, Inc.
6 West Main Street
Freehold NJ 07728

Article Number 97-0035

Service Type
 Registered
 Certified
 Insured
 COD
 Return Receipt for Merchandise
 Signature of Delivery

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

6. Signature: (Addressee or Agent)
X

Domestic Return Receipt

PS Form 3811, December 1994

FPSC-RECORDS/REPORTING
DOCUMENT NUMBER-DATE
01687 FEB 17 94

Thank you for using Return Receipt Service.

ORIGINAL FILE COPY