

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

RECEIVED MAIL
 ACCOUNT RECEIVED REQUEST
 No. 970217



POSTAGE WILL BE PAID BY ADDRESSEE
 RETURNED TO SENDER
 UNDELIVERABLE
 ADDRESS CORRECTED BY ADDRESSEE
 RETURN TO SENDER

Central Payphone Vendors, Inc.
 37636 Beth Street
 Dade City FL 33525-5708

Handwritten signature: M. J. ...

33333/050 AQ

Is your RETURN ADDRESS completed on the reverse side?

REMARKS:
 *Complete items 1 and/or 2 for address service
 *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 mailbox, or on the back if space does not permit
 *Print "Return Receipt Requested" on the mailbox below the article number
 *The Return Receipt will show to whom the article was delivered and the date delivered

1 Article Addressed to: 970217
 Central Payphone Vendors, Inc.
 37636 Beth Street
 Dade City FL 33525-5708

2 Service Type
 Registered Certified
 Express Mail Insured
 Return Receipt for Merchandise COD

3 Date of Delivery

4a Article Number

4b Addresser's Address (Only if requester and fee is paid)

5 Received By (Print Name)

6 Signature (Addressee or Agent)
 X

7 Also wish to receive the following services (for an extra fee):
 1. Addressee's Address
 2. Restricted Delivery
 Consult postmaster for fee

8 Addresser's Address (Only if requester and fee is paid)

PS Form 3811, December 1994
 Domestic Return Receipt

Thank you for using Return Receipt Service.