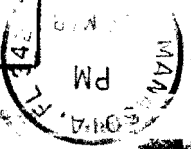


ORDER FROM PRINTED SYSTEMS, INC. (800) 726-3660

OTH WAS SEC RCH OPC LIN LEG EAC CTR JMU AF PP 3A JK
Florida Public Service Commission
Division of Records and Reporting
2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850

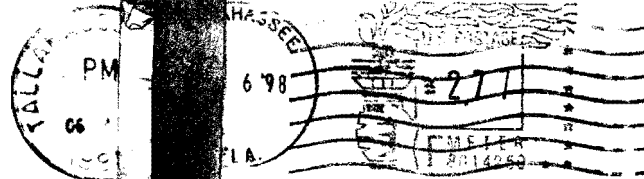
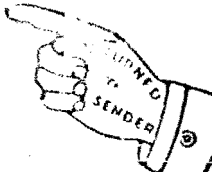
CERTIFIED MAIL
Return Receipt Requested

98-0083



Michael and Lucia Callaway
710 137th Street, East
Bradenton FL 34202-9545

BRADENTON, FL 34203
MAR 24 1998
USPS



LN 3/19/98
WEX

FIRST NO. 3-9
SECOND NO. 3-16
RETURN 3-24

Is your RETURN ADDRESS completed 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: 980106

4a. Article Number 98-0083

Michael and Lucia Callaway
710 137th Street, East.
Bradenton FL 34202-9545

Certified
 Insured
merchandise COD

Insurance (Only if requested)

Signature: (Addressee or Agent)
X

Thank you for using Return Receipt Service.

0364

ORIGINAL

DOCUMENT NUMBER-DATE
MAR 30 8
RECORDS/REPORTING