

ORIGINAL

Thank you for using Return Receipt Service.

I also wish to receive the following services (for an extra fee):

- 1. Addressee's Address
 - 2. Restricted Delivery
- Consult postmaster for fee.

99-022

- Certified
- Insured
- hardie COD

(Only if requested)

Domestic Return Receipt

1. Enter ZIP code for additional services.
 2. Enter name and address on the reverse of this form so that we can return the mailpiece to the front of the mailpiece, or on the back if space does not permit.
 3. Addressee's Address
 4a. Article Number
 4b. Restricted Delivery
 5. Addressee's Signature (Address or Agent)
 6. Date

4a. Article Number

99022

J. Gonzalez
 South Park Road, #1212
 Wood FL 33021-8571

and fee is paid)

Signature: (Addressee or Agent)

3611, December 1994

is your RETURN ADDRESS completed on the reverse side?

- ACK _____
- AFA _____
- APP _____
- CAF _____
- CMU _____
- CTR _____
- EAG _____
- LEG _____
- LWI _____
- OPC _____
- RCH _____
- SEC H _____
- WAS _____
- OTH _____

State of Florida

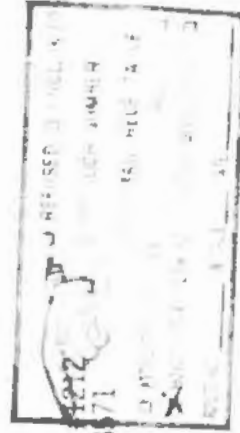
Public Service Commission

2540 Shumard Oak Boulevard
 Tallahassee, Florida 32399-0850

RETURN RECEIPT
 Form RC-100
 99-022



1-7-99



J. Gonzalez
 1212
 South Park Road
 Wood FL 33021-8571

DOCUMENT NUMBER-DATE
 00586 JAN 15 88
 FPSC-RECORDS/REPORTING

33021-8571