

Is your RETURN ADDRESS completed on the reverse side?

6. Signature: (Addressee or Agent)  
**X**

Domestic Return Receipt

ACCUSYS  
Pragna M. Desai  
2533 Six Point Court  
Lakeland FL 33811-2097

3. Article Addressed to:

981530

4a. Article Number

99-92

ATTN: (see pg 100)

ISS (Only if requested)

Certified  
 Insured  
 COD

**SENDER:**  
a Complete items 1 and/or 2 for additional services.  
b Complete items 3, 4a, and 4b.  
c Print your name and address on the reverse of this form so that we can return this card to you.  
d Attach this form to the front of the mailpiece, or on the back if space does not permit.  
e Write "Return Receipt Requested" on the mailpiece below the article number.  
f 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.

Thank you for using Return Receipt Service.

ACK |||  
AFA |||  
APP |||  
CAF |||  
CMU |  
CTR |||  
EAG |||  
LES |  
LIT |||  
OPC |||  
RCH |||  
SEC |  
WAS |||  
OTH |||

DOCUMENT NUMBER-DAT

01598 FEB-88

FPSC-RECORDS/REPORTING

0172

State of Florida

# Public Service Commission

2540 Shumard Oak Boulevard  
Tallahassee, Florida 32399-0850

ACCUSYS  
Pragna M. Desai  
2533 Six Point Court  
Lakeland FL 33811-2097

CERTIFIED MAIL  
Return Receipt Requested

No. 99-92



Forwarding Order Expired  
Insufficient Address  
No Mail Receiptable  
Unclaimed  Refused  
Attempted, Unknown  
No Such Number  
Route No. 196 Carrier Data 1/99