

ACK _____
 AFA _____
 APP _____
 CAF _____
 CMU F
 CTR _____
 EAG _____
 LEG F
 LIN _____
 OPC _____
 RCH _____
 SEC 1
 WAS _____
 OTH _____

DOCUMENT NUMBER - DATE

01600 FEB-88

FPSC-RECORDS/REPORTING

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.

3. Article Addressed to: 981519

Graciela I. Ebert
 301 Belcher Road, N., #1601
 Largo FL 33771-2008

4a. Article Number 993

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

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

Certified
 Insured
 COD

5. R

... if requested

and fee is paid)

6. Signature: (Addressee or Agent) X

PS Form 3811, December 1994

Domestic Return Receipt

EBERT301
 EBERT
 MOVED LEFT TO FORWARD
 RETURN TO SENDER
 33771-2008
 RETURN TO SENDER
 10/7/14
 02/03/99

CERTIFIED MAIL
 Return Receipt Requested
 No. 981-93

Graciela I. Ebert
 301 Belcher Road, N., #1601
 Largo FL 33771-2008

2540 Shunard Oak Boulevard
 Tallahassee, Florida 32399-0850

State of Florida
Public Service Commission

