

State of Florida

# Public Service Commission

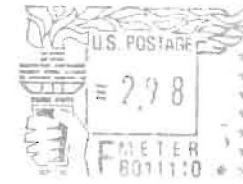
2540 Shumard Oak Boulevard  
Tallahassee, Florida 32399-0850

ORIGINAL

CERTIFIED MAIL  
Return Receipt Requested  
No. 99-307

Mary Laughlin  
206 Montoya Drive  
Lady Lake FL 32159-8643

MLNA



LAUG206 321593794 1798 26 11/13/99  
RETURN TO SENDER  
LAUGHLIN  
MOVED LEFT NO ADDRESS  
UNABLE TO FORWARD  
RETURN TO SENDER

32159-8643 12



DOCUMENT NUMBER - DATE

14119 NOV 17 98

FPSC-RECORDS/REPORTING

Is your RETURN ADDRESS completed on 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: 991165-

4a. Article Number 99-307

Mary Laughlin  
206 Montoya Drive  
Lady Lake FL 32159-8643

- Certified
- Insured
- andise  COD

(Only if requested)

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

Thank you for using Return Receipt Service.