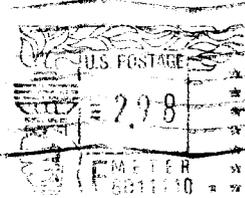


State of Florida

Public Service Commission

2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850

991354-TC

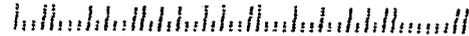


Fred Kaiser
P. O. Box 542336
Merritt Island FL 32954-2336

KAIS336 329542014 1798 06 12/22/99
FORWARD TIME EXP RTN TO SEND
KAISER, FREDERICK G
722 6TH ST
MERRITT ISLAND FL 32953-3341

99-419

32399/0850



POSTAGE WILL BE PAID BY ADDRESSEE

15771 DEC 27 86

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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to: 991354

4a. Article Number: 99-419

Fred Kaiser
P. O. Box 542336
Merritt Island FL 32954-2336

- Certified
- Insured
- Merchandise COD

Special Services (Only if requested)

6. Signature: (Addressee or Agent)
X

Thank you for using Return Receipt Service.



PS Form 3811, December 1994