

00114-TC

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Received by (Please Print Clearly)	B. Date of Delivery
1. Article Addressed to: <u>00114</u>		C. Signature X	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
John Peyton 5545 Patsy Anne Drive Jacksonville FL 32207-7877		D. Is delivery address different from item 1? If YES, enter delivery address below:	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Article Number (Copy from service label) <u>7000 0600 0026 4145 5730</u>		3. Service Type	
PS Form 3811, July 1999		<input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
Domestic Return Receipt		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
102595-99-M-1789			

APP
CAF
CMP
COM
CTR
ECR
LEG
OPC
PAI
RGO
SEC
SER
OTH

1781

DOCUMENT NUMBER - DATE

13286 OCT 18 88

FPSC-RECORDS/REPORTING

FOLD AT DOTTED LINE
CERTIFIED MAIL

State of Florida
Public Service Commission

2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850



7000 0600 0026 4145 5730

John Peyton
5545 Patsy Anne Drive
Jacksonville FL 32207-7877

RETURNED TO SENDER
 Reason checked:
 Unclaimed
 Attempted-Not known
 Insufficient Address
 No such street
 No such office in state
 Do not re-mail in this envelope



REFUSED
RETURNED TO SENDER

