

001474-TX

0490-PAA

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) Lottie Dyson	B. Date of Delivery 3-16-01
1. Article Addressed to:	C. Signature X Lottie Dyson <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
Internet Access and Web Services of Florida, I Kevin L. Hayes P. O. Box 1282 Mt. Dora FL 32756-1282	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	

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Express Mail
 Return Receipt for Merchandise
 O.D.
 Extra Fee) Yes

2. Article Number (Copy from service label)
 7000 0600 0026 4149 3492

PS Form 3811, July 1999 Domestic Return Receipt 102595-99-M-1789

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

DOCUMENT NUMBER-DATE
 03415 MAR 1906
 FPSC-REGTRDS-REPORTING