

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

FPSC-COMMISSION CLERK
DOCUMENT NUMBER-DATE
10634 AUG 27

Is your Bill of Lading 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):
 1. Addressee's Address
 2. Restricted Delivery
 Consult postmaster for fee.

3. Article Addressed to: 010553

4a. Article Number

United Payphones of America, Inc.
 Andrew Marcus
 7041 West Commercial Blvd., Suite 6-A
 Tamarac FL 33319-2145

Certified
 Insured
 COD
 Merchandise

Postage (Only if requested)

6. Signature: (Addressee or Agent)
 X

PS Form 3811, December 1994


Domestic Return Receipt

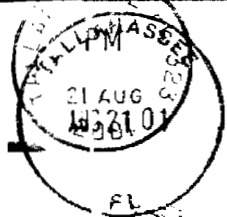
Thank you for using Return Receipt Service.

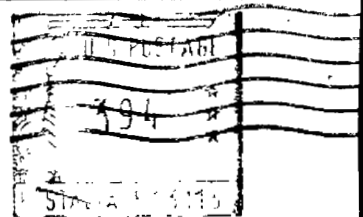
1711-PAA

CERTIFIED MAIL

State of Florida
Public Service Commission
 2540 Shumard Oak Boulevard
 Tallahassee, Florida 32399-0850


 7000 0600 0026 4145 6843





United Payphones of America, Inc.
 Andrew Marcus
 7041 West Commercial Blvd., Suite 6-A
 Tamarac FL 33319-2145

Unclaimed 1938
8/24

RETURNED TO SENDER
 REASON CHECKED
 Unclaimed Refused
 Attempted-Not known
 Insufficient Address
 No such street number
 No such office in state
 Do not re-mail in this envelope

33319+2145 3A

ORIGINAL