

ORIGINAL

PSC-01-1766-PAA-TC

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: 010609-12 4a. Article Number

Florida Equipment Management, Inc.
 Felix Fernandez
 120 Bonaventure Blvd., #207
 Weston FL 33326-1405

Certified
 Insured
 Merchandise COD

is (Only if requested)

6. Signature: (Addressee or Agent)
 X Fernandez

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

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

DOCUMENT NUMBER-DATE
 11009 SEP-56
 FPSC-COMMISSION CLERK