

ORIGINAL

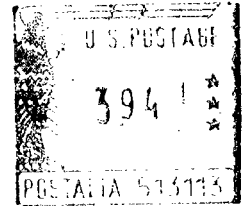
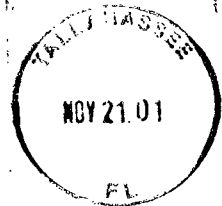
State of Florida

# Public Service Commission

2540 Shumard Oak Boulevard  
Tallahassee, Florida 32399-0850



7000 0600 0026 4144 5755



AvanaCom  
Regulatory Compliance Department  
1690 Chantilly Drive  
Atlanta GA 30324-3293

AVAN609 300462528 1801 12 12/15/01  
RETURN TO SENDER  
: AVANA COMMUNICATION  
BOX CLOSED  
UNABLE TO FORWARD  
RETURN TO SENDER



**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.

3. Article Addressed to: 011045

I also wish to receive the following services (for an extra fee):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

AvanaCom  
Regulatory Compliance Department  
1690 Chantilly Drive  
Atlanta GA 30324-3293

Certified  
 Insured  
for Merchandise  COD

Is your RE X

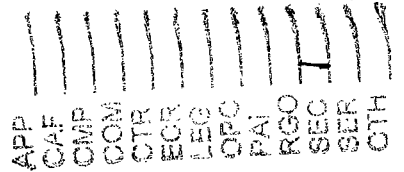
6. Signature: (Addressee or Agent)

Address (Only if requested and fee is paid)

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.



DOCUMENT NUMBER - DATE

16034 DEC 24 01

FPSC-COMMISSION CLERK

011045-711

2295-PAA