

ORIGINAL

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COMMISSION CLERK

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 6/14
1. Article Addressed to: 040161	C. Signature X <i>[Signature]</i>	
Global Link Communications, Inc. 1300 N.W. 167th Street, Suite 1 Miami FL 33169-5738	D. Is delivery address different from item 1? If yes, print delivery address below:	
2. Article Number (Transfer from service label)	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> C.O.D. <input type="checkbox"/> Yes	
PS Form 3811, March 2001	Domestic Return Receipt	102595-01-M-1424

- CMP _____
- COM _____
- CTR _____
- ECR _____
- GCL _____
- OPC _____
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- RCA _____
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- SEC 1
- OTH _____

ORDER NO. PSC-04-0413A-AAA-TI

DOCUMENT NUMBER-DATE

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