

ORIGINAL

RECEIVED-FPSC

05 DEC 23 AM 9:41

COMMISSION
CLERK

SENDER: COMPLETE THIS SECTION

- 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.

1. Article Addressed to: 650686 PSC-05-12

Barbara Ballard
P. O. Box 96
Weirsdale FL 32195-0096

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

W Redding 12-24-05

C. Signature

X Walter Redding Agent
 Addressee

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
(Transfer from service label)

7004 1160 0004 5750 6868

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1422

PSC-05-1237-PAA-TC

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

DOCUMENT NUMBER-DATE

11845 DEC 23 05

FPSC-COMMISSION CLERK