7004 1

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:

PSC-05-1258 050732

Smartel
520 N.E. 18th Street
Boca Raton FL 33432-1924

PAA

COMPLETE THIS SECTION ON DELIVERY

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

C. Signature
X ☐ 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 5751 0445

PS Form 3811, March 2001 Domestic Return Receipt 102595-01-M-1424

FPSC-COMMISSION CLERK

$04.
12/27/
Mailed From
US POS

DN00235-06

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

MOVED NO FW

050732-TI

ORIGINAL

Smartel
520 N.E. 18th Street
Boca Raton FL 33432-1924

RETURNED TO SENDER
☐ INSUFFICIENT ADDRESS
☐ NO SUCH NUMBER
☐ UNCLAIMED ☐ REFUSED
☐ ATTEMPTED NOT KNOWN
☐ NO SUCH STREET
☐ VACANT
☐ NO RECEPTACLE
☒ NOT DELIVERABLE AS ADDRESSED-UNABLE TO FORWARD
ROUTE NO. 3216 DATE 5-3-06
CARR. INITIALS

CMP
COM
CTR
ECR
GCL
OPC
RCA
SCR
SGA