

P5C-05-1237-PAA-TC

ORIGINAL

RECEIVED-FPSC

JAN 25 AM 10:00

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: 050678 PSC-05-1237

COMPLETE THIS SECTION ON DELIVERY

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

C. Signature Agent
 Addressee

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

Metropolitan Payphones Corporation
707 West Avenue
Deland FL 32720-3518

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 7056

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

Public Service Commission

2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850



7004 1160 0004 5750 7056



047382004132
\$04.650
12/19/2005
Mailed From 32399
US POSTAGE



UNCLAIMED

Metropolitan Payphones Corporation
707 West Avenue
Deland FL 32720-3518

1st NOTICE DEC 21 2005
2nd NOTICE 12/27
RETURNED 1/5

32720+3518-07 R009

CMP
COM
CTR
ECR
GCL
OPC
RCA
SCR
SGA
SEC
OTH

DOCUMENT NUMBER - DATE

00713 JAN 25 08

FPSC-COMMISSION CLERK