

RECEIVED-FPSC

05 JAN 27 AM 9:40

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:

050612

Phone-Link, Inc.
P. O. Box 23447
Louisville KY 40223-0447

2. Article Number
(Transfer from service label)

7004 1160 0004 5750 7117

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

State of Florida

Public Service Commission

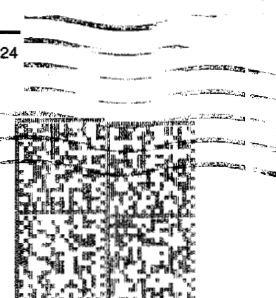
2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850

7004 1160 0004 5750 7117

- REASON CHECKED
- Moved, Left No Address
 - Forwarding Order Expired
 - Unable To Forward
 - Attempted - Not Known
 - Unclaimed Refused
 - No Such Street No Such Number
 - Insufficient Address

Phone-Link, Inc.
P. O. Box 23447
Louisville KY 40223-0447

- A
- C
- S
- INSUFFICIENT ADDRESS
- ATTEMPTED NOT KNOWN
- NO SUCH NUMBER/ STREET
- NOT DELIVERABLE AS ADDRESSED - UNABLE TO FORWARD
- OTHER



US P 12/10 \$0.47

RTS RETURN TO SENDER

CMP COM CTR ECR GCL OPC RCA SCR SGA SEC OTH

DOCUMENT NUMBER-DATE

00830 JAN 27 98

FPSC-COMMISSION CLERK

ORIGINAL

FPSC-05-1209-CO-TX