

ORIGINAL

RECEIVED FPSC

JAN 31 PM 3:22

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: 050727-TI

1 Com South, Inc.
310 South Street
Plainville MA 02762-1547

PSC-06-0051-00-TI

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) 7004 1160 0004 5751 1442

State of Florida

Public Service Commission

2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850

7004 1160 0004 5751 1442

1-M-1424



Receipt

047J82004132

\$04.64

01/20/2006

Mailed From 32399

US POSTAGE

1 Com South, Inc.
310 South Street



NOT DELIVERABLE
AS ADDRESSED,
UNABLE TO FORWARD

CMP
COM
CTR
ECR
GCL
OPC
RCA
SCR
SGA
SEC
OTH

DOCUMENT NUMBER - DATE

00933 JAN 31 '06

FPSC-COMMISSION CLERK