

# ORIGINAL

RECEIVED-FPSC

06 JUN 22 AM 9:13

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: *060455-TP  
Comp. mas*

**AT&T**  
**Brian Musselwhite, Regulatory Manager**  
**101 North Monroe Street, #700**  
**Tallahassee, Florida 32301-1546**

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by <i>(Please Print Clearly)</i>	B. Date of Delivery <i>6-16</i>
C. Signature <i>[Signature]</i>	
<input checked="" type="checkbox"/> Agent	<input type="checkbox"/> Addressee
2. Is delivery address different from item 1? <input type="checkbox"/> Yes	
If YES, enter delivery address below: <input type="checkbox"/> No	

3. Service Type

<input checked="" type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail
<input type="checkbox"/> Registered	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.

4. Restricted Delivery? *(Extra Fee)*  Yes

102595-01-M-1424

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

DOCUMENT NUMBER-DATE

05437 JUN 22 8

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