

ORIGINAL

RECEIVED: FPSC

06 AUG 25 AM 10: 57

COMMISSION  
CLERK

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Received by (Please Print Clearly)	B. Date of Delivery
<p>1. Article Addressed to: <u>060466-TI</u></p> <p>Mr. Orlando Kleen Embratel Americas, Inc. 3350 S.W. 148th Avenue, Suite 132 Miramar, FL 33027-3258</p>	C. Signature <i>x [Signature]</i>	
<p>2. Article Number (Transfer from service label)</p> <p><u>PSC-06-8701-CO-TI</u></p>	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
<p>PS Form 3811, March 2001</p>	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.	
<p>Domestic Return Receipt</p>	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes <u>7005 1160 0003 8789 6915</u>	

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

DOCUMENT NUMBER-DATE  
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