

ORIGINAL

RECEIVED FPSC

06 SEP -1 PM 2:28

COMMISSION CLERK

060465-TL

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: 060465-TL

Habib Fayiz
1434 Ocean Reef Road
Wesley Chapel, FL 33543-6689

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
X Addressee

B. Received by (Printed Name) C. Date of Delivery

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

PSC-06-0702-CO-TC

2. Article Number 7005 1160 0003 8789 5307
(Transfer from service label)

State of Florida

Public Service Commission

2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850

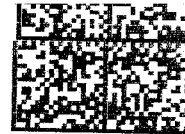
Postage Return Receipt

102595-02-M-1540

047J82004132



7005 1160 0003 8789 5307



Mcgraw-Hill

\$04.640

08/15/2006

Mailed From 32399
US POSTAGE

Habib Fayiz

RETURNED TO SENDER

REASON CHECKED

Returned to Sender

Refused

Recipient Not known

Insufficient Address

Number

to such street

to such office in state

1st NOTICE 8.17

2nd NOTICE 8.17

RETURNED 8.17

CMP _____

COM _____

CTR _____

ECR _____

GCL _____

OPC _____

RCA _____

SCR _____

SGA _____

SEC _____

OTH _____

DOCUMENT NUMBER - DATE

08045 SEP -1 98

FPSC-COMMISSION CLERK