

RECEIVED-FPSC

05 OCT -5 PM 1:23

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: 060467-TX

Mr. William A. Giudice
 Tallahassee Memorial Telephone Company
 1401 Centerville Road, #210
 Tallahassee, FL 32308-4638

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 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 - 0693-CO-TX

2. Article Number 7004 1160 0004 5751 4238

State of Florida
Public Service Commission

2540 Shumard Oak Boulevard
 Tallahassee, Florida 32399-0850



7004 1160 0004 5751 4238



08/14/2006
 Mailed From 32399
 US POSTAGE

Mr. William A. Giudice
 Tallahassee Memorial Telephone Company
 1401 Centerville Road, #210
 Tallahassee, FL 32308-4638

*LNJ
8/16/06
CUE*

REASON CHECKED
 Unclaimed
 Attempted - Not returned
 Insufficient address
 No such street
 No such office in state
 Do not return to this envelope

FIRST CLASS MAIL

*2nd - 9/23/06
 2nd - 9/28/06*

DOCUMENT NUMBER-DATE

09198 OCT-5 98

FPSC-COMMISSION CLERK

ORIGINAL

CMP
 COM
 CTR
 ECR
 GCL
 OPC
 RCA
 SCR
 SGA
 SEC
 OTH