

RECEIVED-FPSC

08 SEP 29 AM 9:51

COMMISSION
CLERK

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none">■ 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.	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> <i>Janette Saskowski</i> <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery <i>9/24/08</i></p>
1. Article Addressed to: <i>080463</i>	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
The Sunshine State Total Communications Mr. Richard Saskowski 2112 Blake Drive Antioch TN 37013-4446	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.
<i>PSC-08-0617-CO-TX</i>	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
2. Article Number: (Transfer from service label)	<i>7006 2760 0003 8797 9069</i>

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

DOCUMENT NUMBER-DATE

09111 SEP 29 08

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