


2022 DEC -2 AM 8:16

RECEIVED-FPSC

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</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>	<b>A. Signature</b> <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
	<b>B. Received by (Printed Name)</b> C. A. J. O. Y.	<b>C. Date of Delivery</b> 12/2/22
1. Article Addressed to: Dkt 20190000-OT DN 08127-2019  MS. MARSHA E. RULE VIRGIN MOBILE RUTLEDGE/ECENIA 119 S. MONROE ST., STE 202 TALLAHASSEE, FL 32301	<b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
 9590 9402 6460 0346 1526 45	<b>3. Service Type</b> <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
2. Article Number (Transfer from service label) 7020 2450 0001 8211 2025	<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery	
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt