

RECEIVED-FPSC

2024 NOV 16 AM 9:41

COMMISSION
CLERK

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none">Complete items 1, 2, and 3.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</p> <p><input checked="" type="checkbox"/>  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>
1. Article Addressed to:	<p>B. Received by (Printed Name) C. Date of Delivery</p> <p>K. Rice 11/04/24</p>
<p>20210000-OT DN 02999-2021</p> <p>From: Oakland Intra: Ste 450 151 Sout. Ste 450 Maitland, FL</p>  <p>9590 9402 6460 0346 0138 23</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
2. Article Number (Transfer from service label)	<p>3. Service Type</p> <ul style="list-style-type: none"><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)<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
7020 1290 0000 7278 8173	Domestic Return Receipt