

ORIGINAL

070372

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: 070372

ALLTEL Communications, Inc.
 Ms. Denise Collins
 1410 Market Street, Suite A
 Tallahassee FL 32312-1774

PSC-07-0645-FOF-TC

2. Article Number
(Transfer from service label)

7006 0810 0002 3488 1965

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 x Reshanda Hill Agent Addressee

B. Received by (Printed Name) C. Date of Delivery
 Reshanda Hill 8-10-07

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

DOCUMENT NUMBER-DATE

07114 AUG 14 8

FPSC-COMMISSION CLERK