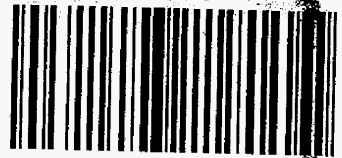


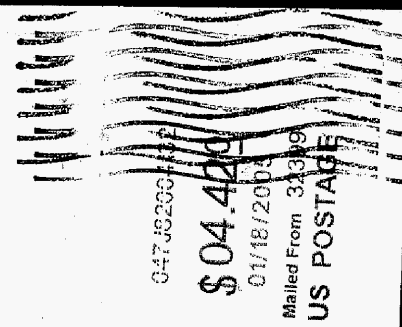
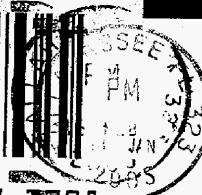
State of Florida
Public Service Commission

2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850

CERTIFIED MAIL

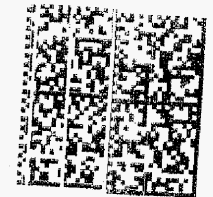


7002 0860 0001 1759 7708



- ☐ Moved, Left No Answer
 - ☐ Unable To Forward
 - ☐ Attempted - Not Known
 - ☒ Unclaimed
 - ☐ No Such Street
 - ☐ Insufficient Address
 - ☐ Refused
 - ☐ No Such Number
- 2nd
11/2/01
KTS
2/4

Southwest Communications
18423 Wintergarden Avenue
Port Charlotte FL 33948-6117



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: 041022

Southwest Communications
18423 Wintergarden Avenue
Port Charlotte FL 33948-6117

CO

2. Article Number
(Transfer from serv)

7002 0860 0001 1759 7708

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature ☒ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS-C-05-0056-CO-TC

ORIGINAL

DOCUMENT NUMBER-DATE
01771 FEB 21 98
FPSC-COMMISSION CLERK