

RECEIVED FPSC

15 NOV 19 AM 9:16

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.		A. Signature  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: DHT: 14058-K15 DN: 0597-15 Mr. Troy Rendell HC Waterworks, Inc. 4939 Cross Bayou Blvd. New Port Richey, FL 34652-3434		B. Received by (Printed Name) Thomas D. Brock	C. Date of Delivery 11-16-15
		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label)		3. 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.	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
		7006 0100 0003 1097 2754	

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

