

State of Florida
Public Service Commission

2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850

ORIGINAL

CERTIFIED MAIL
Return Receipt Requested
No. 99-322



UNCLAIMED



~~DECEASED~~

~~FINAL NOTICE~~

~~JS Communications
Philip Speights~~

~~P.O. Box 99153
TAMPA FL 33689-0153~~

~~11/22~~

~~FINAC 1/27
RETURN 12-7~~

~~[Redacted]~~

DOCUMENT NUMBER - DATE

~~15166 DEC 10 99~~

FPSC-RECORDS-MORTGAG

on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. Addressee's Address
2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

991150

4a. Article Number

99-322

Communications
 Philip Speights
 394 Tansey Court
 Tallahassee FL 32308-5877

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- Certified
- Insured
- COD

til
 ot for Merchandise
 ivery

Address (Only if requested
id)

you

Signature (Addressee or Agent)

X

Domestic Return Receipt

Thank you for using Return Receipt Service.