

CERTIFIED MAIL

State of Florida
Public Service Commission

2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850



7000 0 1500 0026 4145 6003



Gerald Alexander
2713 Carmel Drive
Carrollton TX 75006-2653

LN 10/5

NAME _____
1st Notice _____
2nd Notice 10-2
Return 10-20



SENDER DELIVERABLE PROCESSED

21-250109

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:

Gerald Alexander
2713 Carmel Drive
Carrollton TX 75006-2653

0010-52

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
If YES, enter delivery address below: No

1792

- Express Mail
- Return Receipt for Merchandise
- C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Copy from service label)

DOCUMENT NUMBER-DATE

1418 OCT 31 8

