UNITED STATES POSTAL SERVICE



First-Class Mail Postage & Fees Paid USPS Permit No. G-10

Florida Public Service Commission Clerk

2540 Shumard Oak Boulevard

Tallahassee. Florida 32399-0850

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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 X Sugarature B. Received by (Brinted Name) Greg Follewice C. Date of Delivery
AT&T Florida	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
Mr. Gregory Follensbee 150 South Monroe Street, Suite 400	
Tallahassee FL 32301-1561	3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
100432-TP Complaint	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7010 078	0002 2867 6938
PS Form 3811, February 2004 Domestic Retu	urn Receipt 102595-02-M-1540

DOCUMENT NUMBER-DATE