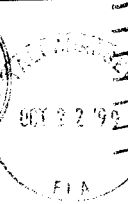


State of Florida

# Public Service Commission

2540 Shumard Oak Boulevard  
Tallahassee, Florida 32399-0851

David Eric Williams  
5809 Crestmont Street  
Clearwater FL 34620-2111



OCT 23 1999

11/3/99

NOV 13 1999

UNCLAIMED

NOV 10 29 99

CERTIFIED MAIL  
Return Receipt Requested  
No. 79-278

WILLIAMS 337603087 10/24 10/27/99  
NOTIFY SENDER OF NEW ADDRESS  
WILLIAMS  
2545 NE COACHMAN RD APT 1  
CLEARWATER FL 33765-1805



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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

2 Article Addressed to:

99120

4a. Article Number

79-278

David Eric Williams  
5809 Crestmont Street  
Clearwater FL 34620-2111

Type

- Certified
- Insured
- Receipt for Merchandise
- COD

Delivery

Addressee's Address (Only if requested and fee is paid)

your RETL

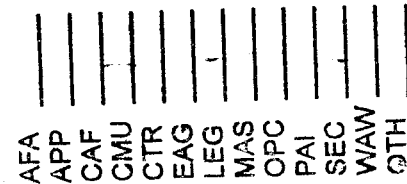
3. Received by:

6. Signature: (Addressee or Agent)

X

Thank you for using Return Receipt Service.

2092



Domestic Return Receipt

DOCUMENT NUMBER - DATE

7429 | NOV 18 99

FPSC-REGISTRATION REPORTING