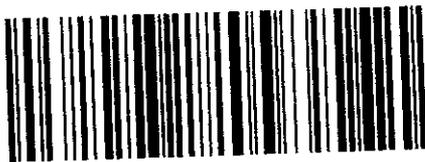


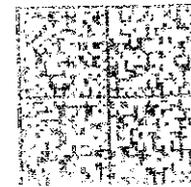
CERTIFIED MAIL™

State of Florida
Public Service Commission

2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850



7006 2760 0003 8797 6747



1st NOTICE 7/18
2nd NOTICE 7/23
RETURNED 8/2

Checked
Delivered
Christopher Vellanti
P. O. Box 27394
Tampa FL 3368

NIXIE

3161 1 20 08/05/08
RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD
RETURN TO SENDER

RECEIVED-FPSC

08 AUG -7 PM 2:44

COMMISSION
CLERK

080124-TC

DOCUMENT NUMBER-DATE

06945 AUG-7 8

FPSC-COMMISSION CLERK

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: 080124

Christopher Vellanti
P. O. Box 273942
Tampa FL 33688-3942

PSC-08-0451-CO-TC

2. Article Number
(Transfer from service label)

7006 2760 0003 8797 6747

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
X Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes