

State of Florida

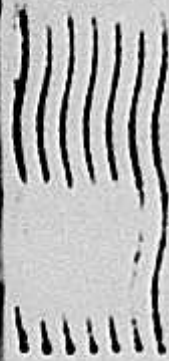
Florida Public Service Commission
Division of Records & Reporting
2540 Shumard Oak Blvd
Tallahassee, Florida 32301

CJ's Communications
P. O. Box 620545
Orlando FL 32862-0545

CERTIFIED MAIL

Return Receipt Requested

No.



MIC

630 A 4-5

32862-0545

FOR RETURN ADDRESS PRINTED ON THE REVERSE SIDE

RECEIVER:

- 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 the 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.

3. Article Addressed to: CJ's Communications
P. O. Box 620545
Orlando FL 32862-0545

4a. Article Number

4b. Service Type

- Registered Certified
 - Express Mail Insured
 - Return Receipt for Merchandise COD
7. Date of Delivery

5. Received By (Print Name)

6. Signature (Addressee or Agent)

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

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

- 1. Addressee's Address
- 2. Restricted Delivery

Consult postmaster for fee

Thank you for using Return Receipt Service

Domestic Return Receipt

DOCUMENT NO.
03691-97
10/10/94