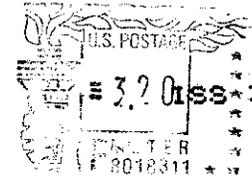


State of Florida

# Public Service Commission

2540 Shumard Oak Boulevard  
Tallahassee, Florida 32399-0850



DOCUMENT NO.  
124033-99  
10-15-99



- Forwarding Order Expired \_\_\_\_\_
- Attempted not known \_\_\_\_\_
- Moved, left no address \_\_\_\_\_
- New address \_\_\_\_\_
- Insufficient address \_\_\_\_\_
- Refused \_\_\_\_\_
- Do not remain in this env \_\_\_\_\_
- Other \_\_\_\_\_

274 Kinvala Dr  
PA 15237

HSS Vending Distributors  
Richard G. Hersperger, President  
1400 Lee Drive  
Coraopolis PA 15108

9/29/99  
NA/MC 104  
37023/10-14  
J/A

**CERTIFIED MAIL**  
Return Receipt Requested  
No. 99-241

Printed 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):
1.  Addressee's Address
  2.  Restricted Delivery
- Consult postmaster for fee.

3. Article Addressed to: 961309      4a. Article Number 99-241

HSS Vending Distributors  
Richard G. Hersperger, President  
1400 Lee Drive  
Coraopolis PA 15108

- Certified
- Insured
- Merchandise  COD

Postage (Only if requested)

6. Signature: (Addressee or Agent)  
X

PS Form 3831, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

AFA	APP	CAF	CMU	CTR	EAG	LEG	MAS	OPC	PAI	SEC	WAW	OTH
-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----