RECEIVED-FPSC

13 JUN -7 AM 9: 02

COMMISSION CLERK

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 mailplece, or on the front if space permits.	A. Signature X. Jranus (J. Bell Addressee B. Received by (Printed Name) C. Date of Delivery Francis X. Bell 6 3 1 3 D. Is delivery address different from Item 1? Yes If YES, enter delivery address below: No 3. Service Type
City of Daytona Beach Mr. John Clary P. O. Box 2451 Daytona Beach, FL 32115-2451	
PSC-13-0226-PAA-TX	☐ Certified Mail ☐ Express Mall ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7010 C	1780 0002 2867 4644
PS Form 3811, February 2004 Domestic Ref	rum Receint 102595-02-M-154

DOCUMENT NUMBER-DATE

03126 JUN-7º

FPSC-COMMISSION CLERK