State of Florida

Public Service Commission

2540 Shumard Oak Boulevard Tallahassee, Florida 32399-0850



0600 0026 4144 6684

SoTel Communications, Inc.
Bruce W. Hollister
1290 Gulf Blvd., #303
Clearwater Beach FL 33767-2738

■ Complete items 3, 4a, and 4b.
■Print your name and address on the reverse of this form so that we can return this

Attach this form to the front of the mailpiece, or on the back if space dies not

1766-PAA

1. Addressee's Address

2.

Restricted Delivery

Consult postmaster for fee.

sh to receive the following services (for an

extra fee):

3. Article Addressed to:

■Write "Return Receipt Requested" on the malpiece below the article number.

■The Return Receipt will show to whom the article was delivered and the date 4a. Article Number

SoTel Communications, Inc.

Bruce W. Hollister 1290 Gulf Blvd., #303 Clearwater Beach FL 33767-2738

☐ Insured chandise [] COD

☐ Certified

3 (Only if requested

6. Signature: (Addressee or Agent)

Is your RETURN ADDRESS

PS Form 3811, December 1994

Domestic Return Receipt

PPSC-COMPRESS CONTEMA

SEP 11

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