P 366 605 225 230

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail *(See reverse)*

94-155
8/14/98

Sent to Sterling Communications Corp.	
Street & Number P.O. Box 14369	
Post Office, State, & ZIP Code Tallahassee, FL 32317	
Postage	$ .78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	$ 3.23
Postmark or Date	

PS Form 3800, April 1995

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.

Is your RETURN ADDRESS completed on the reverse side?

3. Article Addressed to:
Sterling Communications Corp.
P.O. Box 14369
Tallahassee, FL 32317

94-155
8/14/98

4a. Article Number
P-366-605-225

4b. Service Type
☐ Registered ☐ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery
AUG 31 1998

5. Received By: *(Print Name)* Robert Stewart

6. Signature: *(Addressee or Agent)*

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

PS Form 3811, December 1994 Domestic Return Receipt

DOCKET NO. 94-155

FCC MAIL SECTION AUG 27 10 56 AM '98

DISPATCHED BY

ORDER DATED 08-05-98
FEE 98-1629
MIMEOGRAPH NO.

CERTIFIED MAIL P-366-605-225

RETURN RECEIPT REQUESTED

NAME: Sterling Communications Corp. R. R. NO.
P.O. Box 14369
Tallahassee, FL 32317 BY

FCC Form 55 May 1990