

ORIGINAL

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF RETURN ADDRESS

Is your RETURN ADDRESS indicated 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

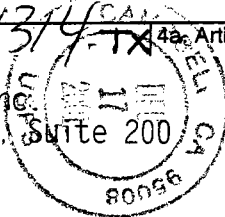
Consult postmaster for fee.

3. Article Addressed to:

011314

4a. Article Number

Telera Communications, Inc.  
910 East Hamilton Avenue, Suite 200  
Campbell CA 95008-0625



PSC-01-2409 -PAA-TX

- Certified
- Insured
- merchandise  COD

12-17

Postage (Only if requested)

Postage and fee is paid

6. Signature: (Addressee or Agent)

*Kenneth Valles*

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

APP  
CAF  
CMP  
COM  
CTR  
ECR  
LEG  
OPC  
PAI  
RGO  
SEC  
SER  
TCH

DOCUMENT NUMBER-DATE

16110 DEC 27 1994

FPSO-COMMISSION OF EPK