

ORIGINAL

**SENDER: COMPLETE THIS SECTION**

- 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 mailpiece, or on the front if space permits.

1. Article Addressed to: **620702**

ezTel Network Service, LLC  
436 Lynchburg Avenue  
Brookneal VA 24528-8943

2. Article Number  
(Transfer from service label)

**7002 0860 0001 1755 5883**

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) **CORETTA DAVIDSON** B. Date of Delivery **12-21-04**

C. Signature **X Coretta Davidson**  Agent  Addressee

D. Is delivery address different from item 1?  Yes  No  
If YES, enter delivery address below:

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

AUS \_\_\_\_\_  
CAF \_\_\_\_\_  
CMP \_\_\_\_\_  
COM \_\_\_\_\_  
CTR \_\_\_\_\_  
ECR \_\_\_\_\_  
GCL \_\_\_\_\_  
OPC \_\_\_\_\_  
MMS \_\_\_\_\_  
SEC   1    
OTH \_\_\_\_\_

DOCUMENT NUMBER-DATE

**14006 DEC 24 8**

FPSC-COMMISSION CLERK