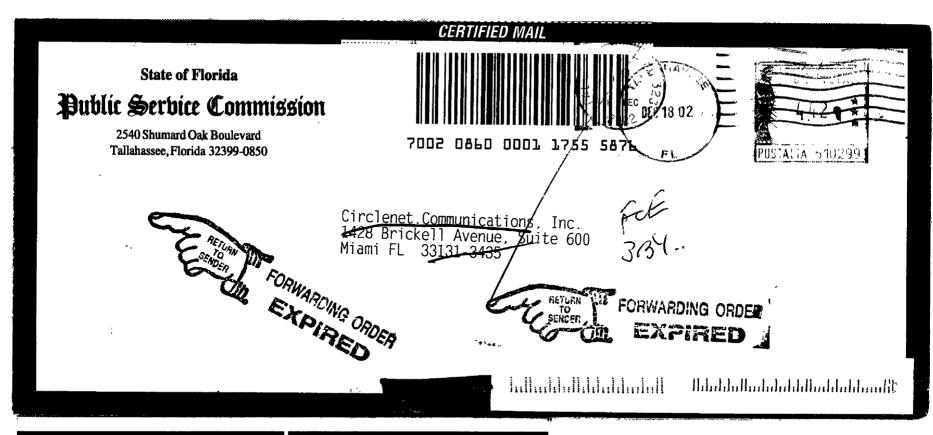
FPSC-COMMISSION CLERK



CEMPED.	COMPL	ETE TUIC	CECTION

- 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: @ 2 112



COMPLETE	TUIC	CECTION	ON	OFLUEDY
OWPLETE	1110	SECTION	o_N	DELIVERT

- A. Received by (Please Print Clearly) B. Date of Delivery
- C. Signature

- ☐ Agent ☐ Addressee
- ☐ Yes D. Is delivery address different from item 1?
 - If YES, enter delivery address below:

3. Service Type

- Certified Mail ☐ Express Mail
- ☐ Registered ☐ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.
- Restricted Delivery? (Extra Fee)
- ☐ Yes

2. Article Number (Transfer from service label)

7002 0860 0001 1755 5876

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

DOCUMENT REMODO