

ORIGINAL

RECEIVED FPSC

OCT 21 AM 10:12

COMMISSION CLERK

SENDER: COMPLETE THIS SECTION


COMPLETE THIS SECTION ON DELIVERY

- 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.

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

EVAN FAZOR

C. Signature

X  Agent Addressee

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

1. Article Addressed to: 030663

M/C Southern Communications, Inc.
% M/C Venture Partners
75 State Street, Suite 2500
Boston MA 02109-1829

3. Service Type

- Certified Mail Express Mail
- Registered Return Receipt for Merchandise
- Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
(Transfer from service label)

7002 0860 0001 1755 6934

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

10277 OCT 21 8

FPSC-COMMISSION CLERK