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COMMISSION CLERK

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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 	A. Received by (Please Print Clearly) B. Date of Delivery
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.	C. Signature Agent Addressee
1. Article Addressed to: 050674	D. Is delivery address different from item 1?
Transcommunications Incorpora 6125 Preservation Drive	
Chattanooga TN 37416-3638	3. Service Type Certified Mail Registered Return Receipt for Merchandise C.O.D.
1 F 1	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service la 7004 1160	0004 5750 7216
PS Form 3811, March 2001 Domestic Ret	urn Receipt 102595-01-M-1424

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