

ORIGINAL
RECEIVED-FPSC

06 JUL 27 PM 12:38

COMMISSION
CLERK

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ 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) <i>VIK JATEL</i>	B. Date of Delivery <i>7/24/06</i>
1. Article Addressed to: <i>060470</i>	C. Signature <i>[Signature]</i> X	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
Via One Technologies, Inc. 201 South Biscayne Blvd., Suite 2807 Miami FL 33131-4332	D. Is delivery address different from item 1? If YES, enter delivery address below: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<i>PSC-06-0619-PAA-TI</i>	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
2. Artic <i>(Tran)</i>	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS For	102595-01-M-1424	

- CMP _____
- COM _____
- CTR _____
- ECR _____
- GCL _____
- OPC _____
- RCA _____
- SCR _____
- SGA _____
- SEC /
- OTH _____

DOCUMENT NUMBER-DATE
 06635 JUL 27 06
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