

ORIGINAL

RECEIVED-FPSC

06 AUG -7 AM 9:42

COMMISSION  
CLERK

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p style="text-align: center;">06046 BOB STOWME AUG 2 2006 CSF</p> <p>Encartele, Inc. 2215 Harney Street Omaha NE 68102-2306</p> <p>PSC-06-0615-RAA-TI</p> <p>2. Article Number (Transfer from ser) 7005 1160 0003 8789 5031</p>	<p>A. Signature  <input checked="" type="checkbox"/> Brenda Cortes  <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>Received by (Printed Name) Brenda J. Cortes            C. Date of Delivery 8-02-06</p> <p>Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>540547 Omaha NE 68154</p> <p>3. Service Type  <input checked="" type="checkbox"/> Certified Mail  <input type="checkbox"/> Registered  <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Express Mail  <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

- CMP \_\_\_\_\_
- COM \_\_\_\_\_
- CTR \_\_\_\_\_
- ECR \_\_\_\_\_
- GCL \_\_\_\_\_
- OPC \_\_\_\_\_
- RCA \_\_\_\_\_
- SCR \_\_\_\_\_
- SGA \_\_\_\_\_
- SEC 1
- OTH KIMP

DOCUMENT NUMBER-DATE

07029 AUG-7 08

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