

ORIGINAL

RECEIVED-FPSC

06 AUG 23 AM 9:36

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>N. Diaz</i>	B. Date of Delivery <i>8/17/06</i>
1. Article Addressed to: <i>060466-TI</i> Network Telephone Corporation 3300 North Pace Blvd. Pensacola, FL 32505-5148	C. Signature <input checked="" type="checkbox"/> <i>[Signature]</i> <div style="float: right;"> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee </div>	
2. Article Number (Transfer from service label) <i>PSC-06-0701-CO-TI</i>	D. Is delivery address different from item 1? If YES, enter delivery address below: <div style="float: right;"> <input type="checkbox"/> Yes <input type="checkbox"/> No </div>	
2. Article Number (Transfer from service label)	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. 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
	2. Article Number (Transfer from service label) <u>7005 1160 0003 8789 6533</u>	

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

- DMP _____
- DOM _____
- DTR _____
- ECR _____
- 3CL _____
- DPC _____
- RCA _____
- SCR _____
- 3GA _____
- SEC |
- DTH _____

DOCUMENT NUMBER-DATE

07659 AUG 23 06

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