

ORIGINAL

RECEIVED-PPSC

06 AUG 24 AM 8:54

COMMISSION
CLERK

SENDER: COMPLETE THIS SECTION

- 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.

1. Article Addressed to: 060466-TI

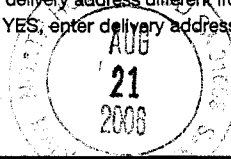
Pacific Centrex Services, Inc.
6855 Tujunga Avenue
North Hollywood, CA 91605-6312

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] Agent Addressee

B. Received by (Printed Name) [Signature] C. Date of Delivery 8/24/06

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



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 7005 1160 0003 8789 6601
(Transfer from service label)

PSC-06-0701-00-TI

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

- CMP _____
- COM _____
- CTR _____
- ECR _____
- GCL _____
- OPC _____
- RCA _____
- SCR _____
- SGA _____
- SEC 1
- OTH _____

DOCUMENT NUMBER-DATE

07768 AUG 24 06

FPSC-COMMISSION CLERK