

RECEIVED-FPSC

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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. 	<p>A. Signature x <i>B. Baw</i></p> <p>B. Received by (Printed Name) <i>Bavilacqua</i></p> <p>C. Date of Delivery <i>6</i></p> <p>D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to: 020351</p> <p>Uni-Tel Communications Group, Inc. 55 South Main Street, #304 Naperville IL 60540-5316</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>RSC-08-0524-PAA-TI</p> <p>2. Article Number (Transfer from service label) 7004 1160 0004 5751 2920</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>

PS Form 3811, September 1994 Certified Return Receipt 102503-01-0000

DOCUMENT NUMBER-DATE

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