

RECEIVED-FPSC

10 JUL 22 AM 8:37

100285-TC

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. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee <i>Sheree Anderson</i></p> <p>B. Received by (Printed Name) <i>SHEREE ANDERSON</i></p> <p>C. Date of Delivery <i>7-14-10</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>
<p>Conversant Technologies, Inc. Ms. Stephanie Coleman 6900 Alma Drive, Suite 180 Plano TX 75023-2067</p>	<p>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.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>100285-TC PS:10-0439.CO-TC</p> <p>2. Article Number (Transfer from service label) 7010 0780 0002 2866 7226</p>	
<p>PS Form 3811, February 2004 Domestic Return Receipt 102585-02-M-1840</p>	

DOCUMENT NO. DATE
05989-10 7,22,10
 FPSC - COMMISSION CLERK