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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 <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>A. [Signature] 6/5</p> <p>D. Is delivery address different from Item 1? <input type="checkbox"/> Yes if YES, enter delivery address below: <input checked="" type="checkbox"/> No</p> <p>JUN - 6 2013</p>
1. Article Addressed to: 130127-TC JLR Communications, Inc. 7715 Crittenden Street, #355 Philadelphia, PA 19118-4421 PSC 13-0235-PAA-TC	3. Service Type <input 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.
2. Article Number (Transfer from service label)	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540	

DOCUMENT NUMBER-DATE

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