

RECEIVED--FPSC

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COMMISSION  
CLERK

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"><li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li><li>Print your name and address on the reverse so that we can return the card to you.</li><li>Attach this card to the back of the mailpiece, or on the front if space permits.</li></ul>	A. Signature <input checked="" type="checkbox"/> <i>Maria Navarete</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: <b>130158-TP DN 03535-13</b>	B. Received by ( <i>Printed Name</i> ) <i>Maria Navarete</i>	C. Date of Delivery <i>2/14/14 CC</i>
<b>DON PITTMAN VICE PRESIDENT/CEO ITS TELECOMMUNICATIONS SYSTEMS INC 15925 SW WARFIELD BLVD INDIANTOWN FL 34956</b>	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
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.	
PS Form 3811, February 2004	7011 3500 0001 5979 4226	
Domestic Return Receipt	102595-02-M-1540	