

Completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1.  Addressee's Address
- 2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

991240

4a. Article Number

99-249

4b. Service Type

- Certified
- Insured
- Receipt for Merchandise
- COD
- Restricted Delivery

North American InTeleCom, Inc.  
 Mark Cantu  
 100 San Pedro Avenue, Suite 400  
 San Antonio TX 78232

11/8/99  
 Addressee's Address (Only if requested and paid)

Thank you for using Return Receipt Service.

Is your signature required?

*[Signature]*

PS Form 3811, December 1994

Domestic Return Receipt

- AFA \_\_\_\_\_
- APP \_\_\_\_\_
- CAF \_\_\_\_\_
- CMU \_\_\_\_\_
- CTR \_\_\_\_\_
- EAG \_\_\_\_\_
- LEG \_\_\_\_\_
- MAS \_\_\_\_\_
- OPC \_\_\_\_\_
- PAI \_\_\_\_\_
- SEC
- WAW \_\_\_\_\_
- OTH \_\_\_\_\_

DOCUMENT NUMBER-DATE

13974 NOV 12 99

FPSC-RECORDS/REPORTING