

ORIGINAL

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.	A. Received by (Please Print Clearly)	B. Date of Delivery
	C. Signature x <i>R. VanBrueck</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: Telecore Communications Corp. Avery Fisher/Peter Silician Jr. 42-40 Bell Boulevard Bayside NY 11361-2861	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No 020665	
2. Article Number (Transfer from service label) <i>7000 0600 0026 4144 4321</i>	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

Express Mail
Return Receipt for Merchandise
C.O.D.

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

AUS _____
CAF _____
GMP _____
COM _____
GTR _____
ECR _____
GCL _____
OPC _____
MMS _____
SEC 1
OTH _____

DOCUMENT NUMBER-DATE

09848 SEP 17 88

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