

ORIGINAL

SENDER: COMPLETE THIS SECTION

- 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.

1. Article Addressed to: **020675**

Easy Tel., Inc.
 Ms. Lorinda C. Bucchieri
 P. O. Box 82097
 Las Vegas NV 89180-2097

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) *L. Bucchieri* B. Date of Delivery *12/24/02*

C. Signature *[Signature]* Agent
 Addressee

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Transfer from service label) **7002 0860 0001 1755 5845**

- AUS _____
- CAF _____
- CMP _____
- COM _____
- CTR _____
- ECR _____
- GCL _____
- OPC _____
- MMS _____
- SEC I
- OTH _____

DOCUMENT NUMBER-DATE
14054 DEC 27 02
 FPSC-COMMISSION CLERK