

ORIGINAL

RECEIVED-FPSC

06 JUL 26 AM 9:40

COMMISSION
CLERK

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. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
1. Article Addressed to: 060462 Network Telephone Corporation 3300 North Pace Blvd. Pensacola, FL 32505-5148	B. Received by (Printed Name) <i>W. Diaz</i>	C. Date of Delivery <i>7/24/06</i>
2. Article Number <i>PSC-06-0611-PAA-TX</i> <i>(Transfer from service label)</i>	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
	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. 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
	7004 1160 0004 5751 2821	

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

CMP _____
 COM _____
 CTR _____
 ECR _____
 GCL _____
 OPC _____
 RCA _____
 SCR _____
 SGA _____
 SEC 1
 OTH _____

DOCUMENT NUMBER-DATE

06556 JUL 26 06

FPSC-COMMISSION CLERK