

ORIGINAL
RECEIVED FPSC

05 JUL 27 PM 12:38

COMMISSION
CLERK

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: 060470

Axces of Delaware, Inc
10878 Westheimer, #294
Houston TX 77042-3202

PSC-06-0619-PAA-TI

2. Article Number
(Transfer from service label)

7004 1160 0004 5751 2210

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

7-24-06

C. Signature

X M. Rizvi 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

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

DOCUMENT NUMBER-DATE

06631 JUL 27 06

FPSC-COMMISSION CLERK