

ORIGINAL

RECEIVED-FPSC

06 JUL 27 PM 12: 38

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 name and address on the reverse so 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 7-24-06
1. Article addressed to: 060462	C. Signature X Brandon M [Signature]	
Fonix Telecom, Inc. Ms. Linda Hunt % Lightyear Network Solutions LLC 1901 Eastpoint Parkway Louisville KY 30346-2123	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
PSC-06-0611-PAA-TV	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.	
2. Article Number (Transfer from service label)	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes 7004 1160 0004 5750 7629	
PS Form 3811, March 2001	Domestic Return Receipt	102595-01-M-1424

- CMP _____
- COM _____
- CTR _____
- ECR _____
- GCL _____
- JPC _____
- RCA _____
- SCR _____
- IGA _____
- IEC |
- OTH _____

DOCUMENT NUMBER-DATE

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