

RECEIVED-FPSC

06 JUL 28 AM 9:31

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: 060469

Public Communications Services, Inc.  
11859 Wilshire Blvd., Suite 600  
Los Angeles CA 90025-6621

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) KIESHLA S. BRUNER B. Date of Delivery 7/24/06

C. Signature X Kiesel S. Bruner  Agent  Addressee

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

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

4. Restricted Delivery? (Extra Fee)  Yes

PSC-06-0618-PAA-TC

2. Article N  
(Transfer)

PS Form 3

95-01-M-1424

- CMP \_\_\_\_\_
- COM \_\_\_\_\_
- CTR \_\_\_\_\_
- ECR \_\_\_\_\_
- GCL \_\_\_\_\_
- OPC \_\_\_\_\_
- RCA \_\_\_\_\_
- SCR \_\_\_\_\_
- SGA \_\_\_\_\_
- SEC   |
- OTH \_\_\_\_\_

DOCUMENT NUMBER-DATE

06693 JUL 28 06

FPSC-COMMISSION CLERK