

ORIGINAL

RECEIVED

JUL 28 11 30 AM '04

COMMISSIONER
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:

Pacific Centrex Services, Inc.
6855 Tujunga Avenue
North Hollywood, CA 91605-6312

PSC-06-0611-AAA-TX

2. Article Number

(Transfer from service label)

7004 1160 0004 5751 2753

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X 

Agent

Addressee

B. Received by (Printed Name)

LUCY ANDRINO

Date of Delivery

7-28-04

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 I

OTH _____

DOCUMENT NUMBER-DATE

06727 JUL 28 04

FPSC-COMMISSION CLERK