

ORIGINAL

RECEIVED-FPSC

06 JUL 31 AM 10:52

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: 060466

Touch-Tel USA, LLC  
5444 Westheimer Road, Suite 1535  
Houston TX 77056-5395

PSC-06-0615 - PAA-TI

2. Article Number  
(Transfer from service label)

7004 1160 0004 5750 9746

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
*Veronica Sanchez*  Addressee

B. Received by (Printed Name) C. Date of Delivery  
*Veronica Sanchez* *7-26-06*

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

06799 JUL 31 06

FPSC-COMMISSION CLERK