

ORIGINAL

RECEIVED FPSC

05 AUG 22 AM 9:07

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-II

Telliss, LLC
9093 Technology Drive, Suite 104
Fishers, IN 46038-3083

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 M. J. Gadaleta Agent
 Addressee

B. Received by (Printed Name) M. J. GADALETA C. Date of Delivery 8-18-06

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

2. Article Number
 (Transfer from service label) PSC-06-0781-CO-TI 7005 1160 0003 8789 6694

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

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

DOCUMENT NUMBER-DATE
07580 AUG 22 06
 FPSC-COMMISSION CLERK