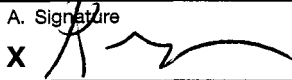


ORIGINAL

070351-TX

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature <input checked="" type="checkbox"/>  <div style="float: right;"> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee         </div>
1. Article Addressed to: <u>070351A-TX</u>  Hybrid Networks, LLC 1 Jake Brown Road Old Bridge NJ 08857-1973	B. Received by ( <i>Printed Name</i> )   <i>Date of Delivery</i> <u>KEVIN YOUNG</u>   <u>8/6/07</u>
<u>PSC-07-0547A-PAA-TX</u>	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
2. Article Number (Transfer from service label)	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.  4. Restricted Delivery? ( <i>Extra Fee</i> ) <input type="checkbox"/> Yes
PS Form 3811, February 2004	7005 3110 0002 8806 6515 Domestic Return Receipt <span style="float: right;">102595-02-M-1540</span>

DOCUMENT NUMBER-DATE

06948 AUG-9 07

FPSC-COMMISSION CLERK