

SENDED, COMPLETE THE SECTION	COMPLETE THIS SECTION ON DELIVERY
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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. 	A. Signature X
1. Article Addressed to: 070383	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
Synergy Telecom Service Co., Inc. 12126 El Sendero San Antonio TX 78233-6720	
PSC-07-0651-CO-TC	ervice Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
	4. Restricted Delivery? (Extra Fee)
2. Article Number 7005 311 (Transfer from service label)	0 0002 8806 5549
PS Form 3811, February 2004 Domestic Reti	urn Receipt 102595-02-M-1540

DOCUMENT NUMBER - DATE

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