

RECEIVED-FPSC

08 AUG 25 PM 1:04

COMMISSION
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<p>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>Print your name and address on the reverse so that we can return the card to you.</p> <p>Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>X <i>[Signature]</i></p>	
<p>1. Article Addressed to: 030375</p> <p>Global Telecom, Inc. 11845 West Olympic Blvd., Suite 600 Los Angeles CA 90064-1149</p>		<p>B. Received by (Printed Name) <i>Steven Smith</i> Date of Delivery <i>AUG 21 2008</i></p> <p>C. Date of Delivery</p>	
<p>2. Article Number (Transfer from service label) RAC-08-0524-PAA-TJ</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If YES, enter delivery address below: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>PS Form 3825, February 2004</p>		<p>Domestic Return Receipt</p>	
		<p>7004 1160 0004 5751 3149</p>	

DOCUMENT NUMBER-DATE

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