

RECEIVED-FPSC

08 SEP -4 PM 12: 24

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: **020477**

Digital Express, Inc.  
Mr. Thomas A. Armstrong  
1803 West Fairfield Drive  
Pensacola FL 32501-1040

**PSC-08-0562-PAA-TX**

2. Article Number  
(Transfer from service label)

**7006 2760 0003 8797 7898**

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee  
*[Signature]*

B. Received by (Printed Name) C. Date of Delivery  
**PD Harris** **9-2-08**

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

DOCUMENT NUMBER-DATE

**08130 SEP -4 08**

FPSC-COMMISSION CLERK