RECEIVED-FPSC 08 SEP -5 PM 1: 20 COMMISSION CLERK

Comments of the comments of th			and the second second	
DEMORAL COMFLETS THIS SECTION		COMPLETE THIS SECTION OF 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. Cuple Mule Addressee B. Received by (Printed Name) C. Date of Delivery Crysul Mulem G. Date of Delivery		
Article Addressed tó:	030472	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:		
Zenith Communication 210 East Main Street Walhalla SC 29691-		·		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3. Service Type Certified Mail Registered Insured Mail	☐ Express Mail☐ Return Receip☐ C.O.D.	nt for Merchandise
PSC-08-0562-PAA-TX		4. Restricted Deliver	y? (Extra Fee)	☐ Yes
Article Number (Transfer from service label) —	7006 2760	0003 8797	-7843	
PS Form 3811, February 2004	Domestic Retu	ırn Receipt		102595-02-M-1540