

RECEIVED-FPSC

08 SEP -5 PM 1:20

COMMISSION  
CLERK

BEFORE 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"/> <i>C. Batly</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) C. Date of Delivery <i>9/2</i>
1. Article Addressed to: <b>080492</b>	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
Touchtone Communications Inc. of Delaware 16 South Jefferson Road Whippany NJ 07981-1047	
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.	
PSC-08-0562-PAA-TX	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
2. Article Number (Transfer from service label)	7006 2760 0003 8797 8048
PS Form 3811, February 2004	Domestic Return Receipt 102595-02-11-1545

DOCUMENT NUMBER-DATE

08219 SEP-5 8

FPSC-COMMISSION CLERK