

RECEIVED-FPSC

08 SEP 12 AM 9:44

COMMISSION
CLERK

SENDING: 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: **080321**

ABI Network Solutions, Inc.
1321 Connellsville Road
Lemont Furnace PA 15456

PSC-08-0570-CO-TA

COMPLETE THIS SECTION FOR DELIVERY

A. Signature
x Amanda Jarrell Agent Addressee

B. Received by (Printed Name) **Amanda Jarrell** C. Date of Delivery **9/8/08**

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

2. Article Number **7006 2760 0003 8797 8154**
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102596-02-M-1540

DOCUMENT NUMBER-DATE

08515 SEP 12 8

FPSC-COMMISSION CLERK