

RECEIVED-FPSC

09 JUN -8 AM 10:28

COMMISSION  
CLERK

SENDER. 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>	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee <i>X Thea Sta</i></p> <p>B. Received by (Printed Name) <i>Thea Sta</i> C. Date of Delivery</p> <p>D. Is delivery address different from item? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>
1. Article Addressed to:  WQ Long Distance Mr. Eddie Mishan 230 Fifth Avenue, Suite 800 New York NY 10001-7704	3. 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.
2. Article Number (Transfer from service label) <i>PSC-09-0365-PAA-TI 090266-TI</i>	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
7006 0810 0002 3487 6824	

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

DOCUMENT NUMBER-DATE  
05726 JUN-8 8  
FPSC-COMMISSION CLERK