RECEIVED-FPSC 10 JAN 20 AM 10: 14 COMMISSION CLERK

090077-TI

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON 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 Huffle B. Received by (F	Boyd	Agent Addressee C. Date of Delivery
Article Addressed to:			ess/different from item elivery address below:	
ProNet Communications, Incorporated P. O. Box 966 Morehead KY 40351-0966		•		
		3. Service Type Certified Mai Pegistered Insured Mail	Return Recei	pt for Merchandise
PSC-10-0022-FOF-TI	090077-TI	4. Restricted Deliv	ery? (Extra Fee)	☐ Yes
Article Number (Transfer from service label)	7006 2760	0003 8798	_ 7882	
PS Form 3811, February 2004 Domestic Return Receipt			102595-02-M-1540	

DOCUMENT NUMBER-DATE

00461 JAN 20 º