

RECEIVED-FPSC

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COMMISSION  
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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>	A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee
1. Article Addressed to:      <p style="text-align: center;">Tremcom International, Inc. 6167 Bristol Parkway, #320 Culver City CA 90230-6621</p>	B. Received by (Printed Name) <i>Trem Com Inc</i> C. Date of Delivery <i>6/20/11</i>
	D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below.
2. Article Number (Transfer from service label)	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.
110152-T1 PSC-11-0260 PAA-T1 <sup>DW</sup>	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
7009 3410 0002 4112 5917	



DOCUMENT NUMBER-DATE

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