

RECEIVED--FPSC

11 JUL 20 AM 10:43

COMMISSION
CLERK

COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ 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. 	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <i>Debbie Carter</i></p> <p>B. Received by (Printed Name) <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <i>Debbie Carter</i></p> <p>C. Date of Delivery: <i>7/15</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p>United Am... 1401 Soui... Edmond, ...-5774</p>	<p>3. Service Type</p> <p><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.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p> <p><i>PSC-11-D300-CO-TT 110182</i></p>	<p><i>7009 3410 0002 4112 6426</i></p>
<p>PS Form 3811, February 2004</p>	<p>Domestic Return Receipt 102596-02-M-1540</p>

DOCUMENT NUMBER-DATE

05003 JUL 20 =

FPSC-COMMISSION CLERK