

RECEIVED-FPSC

11 DEC 19 PM 12:49

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>	A. Signature <input checked="" type="checkbox"/> <i>Donna Butler</i>	
1. Article Addressed to: <b>110261-TX DN 06237-11</b>	B. Received by (Printed Name)	C. Date of Delivery
<p>SUSAN J BERLIN ESQUIRE            SPRINT NEXTEL - REGULATORY AFFAIRS            GAATLD0704 - 7<sup>th</sup> Floor            3065 AKERS MILL RD SE            ATLANTA GA 30339</p>	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
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.	
	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS Form 3811, February 2004	Domestic Return Receipt	102595-02-M-1540

DOCUMENT NUMBER-DATE

09038 DEC 19 =

FPSC-COMMISSION CLERK