

RECEIVED-FPSC

12 FEB 27 AM 9:21

COMMISSION CLERK

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<p>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse that we can return the card to you. Attach this card to the back of the mailpiece, on the front if space permits.</p>	<p>A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p>	
<p>Article Addressed to: 130000-0T * { -11, 03262-11, 04818-11, 06709-11 and -11</p> <p>Wye Willis Midstream Communications Inc. 560 Morris Rd. Suite 2500 Milton, GA 30004</p>	<p>B. Received by (Printed Name) J. MOACE</p>	<p>C. Date of Delivery 2-23-12</p>
<p>2. Article Number (Transfer from service label)</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>PS Form 3811, February 2004</p>	<p>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.</p>	
<p>Domestic Return Receipt</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p> <p>7006 2760 0003 8796 9923</p>	
<p>102595-02-M-1540</p>		

includes 246  
\* { 00681-11  
08203-11 per MM 2/27/12  
-am

DOCUMENT NUMBER-DATE  
01082 FEB 27 2012  
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