

Undeliverable envelope returned from the U.S. Post Office.

Address is consistent with the Master Commission Directory or the Case Management System.



RECEIVED FPSC
15 JUL -7 AM 10:01
COMMISSION
CLERK

SENDER: 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. 	A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X	
1. Article Addressed to: <p style="color: red; font-size: 1.2em; margin-left: 20px;">150629-TX PC-15-0104-PAF-TX</p> <div style="border: 1px solid black; padding: 5px; margin: 10px auto; width: 80%; text-align: center;"> BeCruising Telecom 4179 East 8th Court Hialeah FL 33013-2401 </div>	B. Received by (<i>Printed Name</i>)	C. Date of Delivery
2. Article Number <i>(Transfer from service label)</i>	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
	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? (<i>Extra Fee</i>) <input type="checkbox"/> Yes	
<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 7011 3500 0001 5977 6468 </div>		
PS Form 3811, February 2004	Domestic Return Receipt	102595-02-M-1540