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<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>	<b>A. Signature</b> <input checked="" type="checkbox"/> <i>W. Baird</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: <i>Dr. Moody</i> <i>Dr. Moody</i>	<b>B. Received by (Printed Name)</b> <i>W. BAIRD</i>	<b>C. Date of Delivery</b> <i>2/16/17</i>
Nexus Communications, Inc. Heather Kirby 1725 Windward Concourse Suite 150 Alpharetta, Georgia 30005	<b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. <b>7015 1520 0002 5520 2973</b>	<b>3. Service Type</b> <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.	
	<b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes	