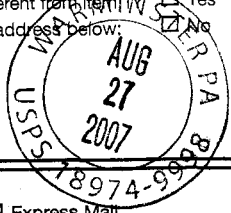


RECEIVED-FPSC

07 AUG 30 PM 12:42

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. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>NANCY J. SHAPIRO</i></p> <p>C. Date of Delivery <i>8-27-07</i></p>
<p>1. Article Addressed to: <i>070383</i></p> <p><i>Budtel, Inc.</i> <i>1814 Mearns Road</i> <i>Warminster PA 18974-1195</i></p> <p><i>PSC-07-0651-CO-TC</i></p>	<p>D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</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>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p>	<p><i>7005 3110 0002 8806 5341</i></p>



DOCUMENT NUMBER-DATE

07834 AUG 30 5