

RECEIVED-FPSC

07 SEP 24 AM 9:54

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>	<p>A. Signature  <input checked="" type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Constance J. F. [Signature]</i> C. Date of Delivery <i>9/24/07</i></p>
<p>1. Article Addressed to: <i>070503</i></p> <p style="text-align: center;">Nextlink Wireless, Inc.  11111 Sunset Hills Road  Reston VA 20190-5339</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  <input type="checkbox"/> No  If YES, enter delivery address below:</p>
<p><i>PSC-07-0738-CO-TI</i></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>7006 2760 0003 8797 5894</i></p>

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

DOCUMENT NUMBER DATE

*08690 SEP 24 07*

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