

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul> <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>	A. Signature X Multiple Automotion B. Received by (Printed Name)	$  \begin{array}{c} \Box \text{ Agent} \\ \Box \text{ Addressee} \\ \hline C. \text{ Date of Delivery} \\ \hline C - \int & - & \gamma \end{array} $
1. Article Addressed to: 070451	D. Is delivery address different from item 1?	
Touch-Tel USA, LLC 5444 Westheimer Road, Suite 1535 Houston TX 77056-5395		
	Ice Type Certified Mail Express Mai Registered Return Rece Insured Mail C.O.D.	l ipt for Merchandise
756-07-0799.CO-TI	4. Restricted Delivery? (Extra Fee)	Ves
2. Article Number 7006 2760 0003 8797 6082 (Transfer from service label)		
PS Form 3811, February 2004 Domestic Ret	urn Receipt	102595-02-M-1540

DOCUMENT NUMBER-DATE 09267 OCT 10 5 5PSC-COMMISSION CLERK