

110116-TX

RECEIVED-FPSC

11 JUN 17 AM 8:30

COMMISSION
CLERK

<p>SENDER. COMPLETE THIS SECTION</p> <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>1. Article Addressed to:</p> <p>SIP Interchange Corporation 1415 South Voss Road, #110-463 Houston TX 77057-1086</p>	
<p>2. Article Number <i>(Transfer from service label)</i></p> <p><u>PSC-11-0248-CO-TX 110116-TX</u> <u>7009 3410 0002 4112 5672</u></p>	
<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-15/1</p>	

<p>ADDRESSEE. COMPLETE THIS SECTION</p>	
<p>A. Signature</p> <p><i>[Handwritten Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>B. Received by (Printed Name)</p> <p><u>MARTIN NILSON</u></p>	<p>C. Date of Delivery</p> <p><u>6-13-11</u></p>
<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes</p> <p>if YES, enter delivery address below: <input type="checkbox"/> No</p>	

DOCUMENT NUMBER-DATE

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