

RECEIVED-FPSC

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COMMISSION  
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080278-TL

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 <i>Earl Yu</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery <i>1-8</i></p>
<p>1. Article Addressed to: <i>080278</i></p> <p>Verizon Florida LLC. (08ALPHA) Dulaney L. O'Roark III 5055 North Point Parkway Alpharetta GA 30022</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</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><i>PSC-09-0015-SC-TL</i></p> <p>2. Article Number (Transfer from service label)</p>	<p><i>7006 0810 0002 3488 1422</i></p>

PS Form 3811, February 2004

Domestic Return Receipt

102695-02-M-1540

DOCUMENT NUMBER-DATE

00255 JAN 12 8

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