

RECEIVED-FPSC

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<p>■ 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>	<p>A. Signature <input checked="" type="checkbox"/> Agent  <input checked="" type="checkbox"/> Addressee</p>
<p>1. Article Addressed to: <b>090501-TP</b>  <b>DN 04305-10</b></p> <p>DULANEY L O'ROARK III ESQ          VERIZON          5055 N POINT PKWY          ALPHARETTA GA 30022</p>	<p>B. Received by (Printed Name) C. Date of Delivery  <b>CHRIS LINA 11-18</b></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>2. Article Number (Transfer from service label) <b>7009 3410 0002 4112 6891</b></p>	

PS Form 3811, February 2004

Domestic Return Receipt

102585-02-M-1540

DOCUMENT NUMBER DATE

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