


RECEIVED-FPSC

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COMMISSION
CLERK

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<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>A. Signature </p> <p><input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>Jose Medina</u></p> <p>C. Date of Delivery <u>8/11/17</u></p>
1. Article Addressed to: <u>207000-07</u> <u>Document # 05767-2017</u>	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
Collen Lockett West Safety Communications Inc. 16010 Dry Creek Drive Longmont, CO 80503-6493	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.
2. <u>7015 0640 0001 2706 4018</u>	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes