

RECEIVED-FPSC
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 COMMISSION
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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 <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <i>x Carol Watcher</i></p> <p>B. Received by (Printed Name) <input type="checkbox"/> Agent <i>Carol Watcher</i></p> <p>C. Date of Delivery</p>	
<p>1. Article Addressed to: <i>070383</i></p> <p>Paragon Communication Services, L.L.C. 4485 Tench Road, Suite 420 Suwanee GA 30024-6738</p> <p><i>PSC-07-0651-CO-7C</i></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)</p>	<p><i>7005 3110 0002 8806 5495</i></p>	

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

DOCUMENT NUMBER-DATE
 07270 AUG 20 05
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