

RECEIVED-FPSC

07 AUG 27 AM 10:48

COMMISSION  
CLERK

**SENDER: COMPLETE THIS SECTION**

- 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.

1. Article Addressed to: 070477

US Telesis  
200 North Westlake Blvd., Suite 104  
Westlake Village CA 91362-3770

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature [Signature]  Agent  
 Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

PSC-07-0666-PAA-TI 4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number 7005 3110 0002 8806 5877  
(Transfer from service label)

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

DOCUMENT NUMBER - DATE

07616 AUG 27 06

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