

RECEIVED-FPSC

08 AUG 21 AM 10:07

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: 080369

Advanced Telemanagement Group, Inc
5909 N.W. Expressway, Suite 403
Oklahoma City OK 73132-5103

PSC-08-0524-PAA-TI

2. Article Number
(Transfer from service label)

7004 1160 0004 5751 3088

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
X Steven C. Riley Addressee

B. Received by (Printed Name) STEVEN C. RILEY C. Date of Delivery 8/18/08

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.

4. Restricted Delivery? (Extra Fee) Yes



DOCUMENT NUMBER-DATE

07524 AUG 21 8

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