RECEIVED-FPSC

08 SEP -8 PM 12: 07

COMMISSION CLERK

SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Postricted P. II.	COMPLETE THIS SECTION ON DELIVERY
 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. 	A. Signature X Chalcha Agent B. Received by (Printed Name) C. Date of Delive
1. Article Addressed to: 080439	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
One Voice Communications, Inc.	
570 Herndon Parkway, Suite 200	
Herndon VA 20170-5247	
DCC-04-1151 0	3. Service Type Certified Mail
PSC-08-0562-PAA-TX Article Number	4. Restricted Delivery? (Extra Fee) ☐ Yes
(Transfer from service label, 7006 2760 [S Form 3811, February 2004 Domestic Potential Pot	7408 797 8007

OCH NORTH WEMPER-DATE

8297 SEP-8 #