

RECEIVED-FPSC

08 SEP 12 AM 9:44

COMMISSION  
CLERK

| SENDER: COMPLETE THIS SECTION  | COMPLETE THIS SECTION ON DELIVERY   |
|--|---|
| <ul style="list-style-type: none"><li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li><li>■ Print your name and address on the reverse so that we can return the card to you.</li><li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li></ul> | <p>A. Signature <input type="checkbox"/> Agent<br/><input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes<br/>If YES, enter delivery address below: <input type="checkbox"/> No</p> |
| 1. Article Addressed to: <b>080458</b><br><br>Georgia Public Web, Inc.<br>% Hall, Booth, Smith & Slover, P.C.<br>1180 West Peachtree Street, N.W., #900<br>Atlanta GA 30309-3479   | Service Type<br><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail<br><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise<br><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.                                      |
| 2. Article Number<br>(Transfer from service label) <b>PSC-08-0568-PAA-TX</b><br><b>7006 2760 0003 8797 7737</b>  | 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes  |

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

DOCUMENT NUMBER-DATE

08510 SEP 12 08

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