

RECEIVED-FPSC

11 SEP -2 AM 8:39

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 checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee <i>Calvin M. News</i></p> <p>B. Received by (Printed Name) <i>Patrice Norris</i> C. Date of Delivery <i>8/22/11</i></p>
<p>1. Article Addressed to: <i>undocketed</i> <i>DNS 03306-09; 03909-09</i></p> <p>ANGELA MCCALL MANAGER FRONTIER COMMUNICATIONS SOLUTIONS GOVERNMENT AND EXTERNAL AFFAIRS 300 BLAND ST BLUEFIELD WV 24701</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" 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>7009 3410 0002 4112 5177</i></p>
<p>PS Form 3811, February 2004 Domestic Return Receipt 502598-02-14-1540</p>	

DOCUMENT NUMBER DATE

06345 SEP -2 =

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