

RECEIVED-FPSC

11 OCT -3 AM 9:58

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>	A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
1. Article Addressed to:  Equity Pay Telephone Co., Inc. Robert F. Furlong, President 25 Newman Drive Brunswick, Georgia 31520-2935	B. Received by (Printed Name) ROSE FURLONG	C. Date of Delivery 10-3-11
2. Article Number (Transfer from service label)	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No	
PS Form 3811, February 2004	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. 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PSC-11-0416-EO-TC 110245-TC 7009 3410 0002 4112 7287		
PS Form 3811, February 2004		Domestic Return Receipt 102595-02-M-1540

DOCUMENT NUMBER-DATE

07187 OCT-3 =

FPSC-COMMISSION CLERK