

RECEIVED-FPSC

13 JUN 10 AM 9:00

COMMISSION
CLERK

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 type="checkbox"/> Agent x <i>Alison Roach</i> <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Alison Roach</i> C. Date of Delivery <i>6-6-13</i></p>
<p>1. Article Addressed to: <i>130102-TX</i></p> <p>MBC Telecom LLC 297 Kingsbury Grade, Suite D#4470 Stateline, NV 89449-9804</p> <p><i>PSC-13-0225-PAA-TX</i></p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type <input 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>7010 0780 0002 2867 8888</p>
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	

DOCUMENT NUMBER-DATE

03163 JUN 10 10

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