

RECEIVED-FPSC

13 DEC 27 AM 9: 59

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 checked="" type="checkbox"/> <i>D. Schneide</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>
<p>1. Article Addressed to: <i>130000-0T</i> <i>DN5 02657-11; 02831-11; 02913-11;</i> <i>03238-11</i></p> <p>MEGHAN RUWET THE COMPLIANCE GROUP 1420 SPRING HILL RD STE 401 MCLEAN VA 22102</p>	<p>B. Received by (Printed Name) <i>D. Schneide</i> C. Date of Delivery</p>
<p>2. Article Number (Transfer from service label)</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><i>MEAN WEST VIRGINIA DEC 19 2013 22102 USPS</i></p>
<p>PS Form 3811, February 2004</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>7011 3500 0001 5979 4424</p> <p>Domestic Return Receipt 102595-02-M-1540</p>