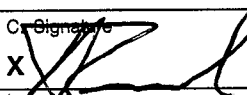


ORIGINAL

RECEIVED-FPSC

06 JUL -3 AM 10:41

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. 	A. Received by (Please Print Clearly)	B. Date of Delivery 6/23/0
<p>1. Article Addressed to: 050951-TX</p> <p>Yipes Enterprise Services, Inc. Ms. Karen Sample 114 Sansome Street, 11th Floor San Francisco CA 94104-3822</p> <p>FSC-06-0511-CO-TX</p>	C. Signature X 	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p>	
<p>2. Article Number (Transfer from service label)</p>	<p>3. Service Type</p> <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>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
	<p>7004 1160 0004 5750 9197</p>	

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

- CMP _____
- COM _____
- CTR _____
- ECR _____
- GCL _____
- OPC _____
- RCA _____
- SCR _____
- SGA _____
- SEC 1
- OTH _____

DOCUMENT NUMBER-DATE

05894 JUL-3 8

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