RECEIVED FPSC 07 SEP 10 AM 10: 10 COMMISSION CLERK

M1	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse 	A. Signature X. Mu. B. J. Must Agent Addressee
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.	B. Received by (Printed Name) C. Date of Delivery
1. Article Addressed to: 076440	D. Is delivery address different from item 1?
Eastern Tel Long Distance Se 200 West Market Street York PA 17401-1008	ervice, Inc. Guyli
PSC-07-0696-PAA-TI	3. Service Type **Certified Mail
	4. Restricted Delivery? (Extra Fee)
2. Article Number 7005 31 (Transfer from service label)	.lo 0002 8806 5242
PS Form 3811, February 2004 Domestic Re	eturn Receipt 102595-02-M-1540

DOCUMENT NUMBER-DATE

08165 SEP 10 &