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COMMISSION CLERK

| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVER | RY |
|--|---|---|
| Complete items 1, 2, and 3. 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. Signature X | |
| 1. Article Addressed to: Docket 20160000-OT DN 01839-2016 Technologies Management Inc. c/o Intrado Communications ATTN: Kimberly Geuder 151 Southhall Lane, Suite 450 Maitland FL 32790-0200 | D. Is delivery address different from item 1' If YES, enter delivery address below: | 7 □ Yes |
| 9590 9402 3287 7196 4725 56 | Adult Signature Registration Adult Signature Registration Registration | rn Receipt for chandise ature Confirmation™ |
| 2. Article Number (Transfer from service label) 7017 0530 0001 1254 2141 | Signal Moil | Signature Confirmation Restricted Delivery |
| PS Form 3811 July 2015 PSN 7530-02-000-9053 | Domesti | ic Return Receipt |