

PU-12-5150 ARCK ND 585

SENDER: COMPLETE THIS SECTION

- 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.

COMPLETE THIS SECTION ON DELIVERY

A. Signature 27 DEC 2012 PM 1 L
 Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
 M. Corey 1/8/13

is different from item 1? Yes
 very address below: No

1. /

STEVE HAMILTON, CEO
 PACIFIC TELECOM COMMUNICATIONS GROUP, INC.
 12228 VENICE BOULEVARD, SUITE 559
 LOS ANGELES, CA 90066

Service type

Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
 (Transfer from service label) 7012 1640 0002 4652 4943