

FILED

AUG 10 2011

Missouri Public  
Service Commission

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.

Halo Wireless, Inc.  
John Marks  
2351 West Northwest Highway, Suite 1204  
Dallas, TX 75220

COMPLETE THIS SECTION ON DELIVERY

10-2012-0635- 8/2/11

A. Signature  
X *Sam Woods* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *Sam Woods* C. Date of Delivery *8/2/11*

Address different from item 1? ☐ Yes ☐ No  
delivery address below.

3. 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)

7008 2810 0001 2932 9291

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

MO Public Service Commission  
Data Center  
P.O. Box 360  
Jefferson City, MO 65102-0360

