

IC-2010-0358 6/11

**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.

1. Article Addressed to:

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X 

☐ Agent

☐ Addressee

B. Received by (Printed Name)

CRAIG ADDISON 6/14/10

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

Legal Department

Sprint Spectrum, L.P., d/b/a Sprint PCS

KSOPHN0212-2A254

6450 Sprint Parkway, Disney A

Overland Park, KS 66251

Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

Restricted Delivery? (Extra Fee)

☒ Yes

**FILED**

JUN 18 2010

3. Article Number

(Transfer from service label)

7007 0710 0002 2047 9732

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

Missouri Public  
Service Commission

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

