

10/5/2004

LC-2005-0090

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:

CenturyTel of Missouri, LLC
Legal Department
525 Cherry St.
Columbia, MO 65201

2. Article Number

(Transfer from service label)

7001 1940 0002 6942 6515

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Susan Craig

☐ Agent☐ Addressee

B. Received by (Printed Name)

SUSAN CRAIG

C. Date of Delivery

10/4/04

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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 •

MISSOURI PUBLIC SERVICE COMMISSION

PO BOX 580

JEFFERSON CITY, MO 64101

FILED

OCT 08 2004

Missouri Public
Service Commission