ENDER: COMPLETE THIS SECTION	MPLETE THIS SECTION ON DELIVERY
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.	A Signature A Signature A Agent Ct Address B. Repeived by (Printed Name) C. Date of Delive D. Is delivery address different from them 12.
1. Article Addressed to: St. Andrews Telecommunications, LLC Legal Department 3300 Riverview Rd Lawrence, KS 66049-2020	D. Is delivery address different from item 1?
	3. Service Type Certified Mail
	4. Restricted Delivery? (Extra Fee)
(Transfer fro 7001 1940 0002 69)	42 5662
Form 3811, August 2001 Domestic R	Return Receipt 102595-02-M-15

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