

**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:

CommRad.com  
Legal Department  
14000 Tahiti Way  
P38  
Marina Del Rey, CA 90292

2. Article Number

(Transfer from service label)

7001 1940 0002 6942 6058

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

M R Owens

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

MAR 22 2004

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 •

**FILED<sup>4</sup>**

MAR 24 2004

MISSOURI PUBLIC  
Service Commission

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