

TC-2004-0820 2-4-04

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:

Fairpoint Communications
Solutions Corporation
Legal Department
521 E. Morehead, Suite 250
Charlotte, NC 28202

2. Article Number

(Transfer from service label)

7002 0460 0003 0704 7147

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Judy Duff

☐ Agent☐ Addressee

B. Received by (Printed Name)

JUDY DUFF

C. Date of Delivery

2/4

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
P.O. BOX 360
JEFFERSON CITY, MO 65102

FILED

FEB 18 2004

Missouri Public
Service Commission