

# MISSOURI PUBLIC SERVICE COMMISSION

January 28, 2004

Case No. TC-2004-0300

Dana K Joyce  
P.O. Box 360  
200 Madison Street, Suite 800  
Jefferson City, MO 65102

John B Coffman  
P.O. Box 7800  
200 Madison Street, Suite 640  
Jefferson City, MO 65102

Central Missouri Telecommunications,  
Inc.

Jay Teutenberg  
P.O. Box 596  
Osage Beach, MO 65065

Enclosed find a certified copy of a NOTICE in the above-numbered case(s).

Sincerely,

*Dale Hardy Roberts*

Dale Hardy Roberts  
Secretary/Chief Regulatory Law Judge

U.S. Postal Service <b>CERTIFIED MAIL RECEIPT</b> (Domestic Mail Only; No Insurance Coverage Provided)	
<b>OFFICIAL USE</b>	
Postage \$	Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	
Sent To: Central Mo Tele	
Street, Apt. No., or PO Box No. P.O. Box 596	
City, State, ZIP+4 Osage Beach MO 65065	

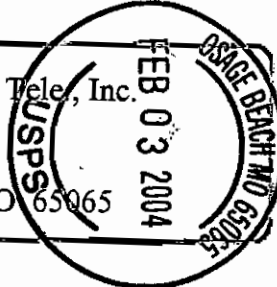
PS Form 3800, January 2001

See Reverse for Instructions

- 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:

Central Missouri Tele, Inc.  
Jay Teutenberg  
P.O. Box 596  
Osage Beach, MO 65065



## SECTION

Also complete  
is desired.  
s on the reverse

## COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X *Elena J...* ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

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

2. Article Number  
(Transfer from service label)

7002 0460 0003 0704 6867

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1540