

SENDER: COMPLETE THIS SECTION	COMPLETE 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 revers so that we can return the card to you. Attach this card to the back of the mailpied or on the front if space permits. 	e B. Received by (Printed Name) C. Date of Deliver
Article Addressed to:	If YES, enter delivery address below: No
Arthur Martinez CenturyTel 220 Madison Street Jefferson City, MO 65101	3. Service Type Certified Mail