

TC-2006-0401 4/17/06

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:

MCI

Attn: Legal Department
500 Technology Dr., Ste 870
Weldon Springs, MO 63304

2. Article Number

(Transfer from service label)

7005 0390 0003 2881 2952

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Yvonne Garcia☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

4/18/06

D. Is delivery address different from item 1? ☐ YesIf 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
ST. LOUIS, MO 631

15 APR 2006 PM 2 T

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

- Sender: Please print your name, address, and ZIP+4 in this box •

MO. PUBLIC SERVICE COMMISSION
P.O. BOX 360
JEFFERSON CITY, MO 65102

Missouri Public
Service Commission

APR 21 2006

FILED³