

| | TO-2005-0117 |
|---|---|
| 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 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. Article Addressed to: Level 3 Communications, LLC Greg Rogers 1025 Eldorado Boulevard Broomfield, CO 80021 | A. Signature A. Signature A. Signature B. Received by (<i>Printed Name</i>) NO (C ₂) Date of Deliver D. Is delivery address different from item 1? If YES, enter delivery address below: No No No No No |
| | Service Type Green Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. |
| | 4. Restricted Delivery? (Extra Fee) Yes |
| 2. Article Number (Transfer from service label) 7099 3220 | s 0009 31699 7876 |
| PS Form 3811, August 2001 Domestic Re | eturn Receipt 102595-02-M-15 |
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