

XC-2007-0035 7/28/06

## 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:

Gates Communications, Inc.  
 Legal Department  
 1100 Olive Way, Suite 951  
 Seattle, WA 98101

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ *May Cleaver*
☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

8-3-06

D. Is delivery address different from item 1? ☒ YesIf YES, enter delivery address below: ☐ No

6947 Coal Ck Pkwy 335  
 Newcastle, WA 98057

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)

7005 0390 0003 2886 2780

UNITED STATES POSTAL SERVICE

SEATTLE WA 981

03 AUG 2006 PM 6:1

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  
Data Center  
P.O. Box 360  
Jefferson City, MO 65102-0360

FILED<sup>4</sup>

AUG 07 2006

Missouri Public  
Service Commission

8003

