

}	015/09 TC-2010-0107
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. 	A. Signature Agent Addressee
1. Article Addressed to: Big River Telephone Company, LLC	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
Legal Department 24 South Minnesota PO Box 1608 Cape Girardeau, MO 63702-1608	3. Service Type Certified Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from ser 7007 0710 0000	

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540