

SENDER: COMPLETE THIS SECTION	TC-2004-057 5-4-04 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. Signatule A. Signatule Agent Addressee B. Reveived by (Printed Name) C. Date of Delivery C. Date of Delivery D. Is delivery address different from item 1?
1. Article Addressed to:	If YES, enter delivery address below:
Fibernet, Inc. John L. Hearne, Esq.	3. Service Type
300 B East High Street Jefferson City, MO 65101	Certified Mail
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7001 1940	84E 54P4 5000
PS Form 3811, August 2001 Domestic R	