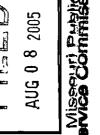
UNITED STATES POSTAL SERVICE Sender: Please print your name, address, and ZIP+4 in this box

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

MO PUBLIC SERVICE COMMISSION

P.O BOX 360 JEFFERSON CITY, MO 65102



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 X
Article Addressed to:	D. Is delivery address different from item 17 \ \sqrt{\sq}}}}}}}}} \sqrt{\sq}}}}}}}}}} \signt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}} \end{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}}} \end{\sqrt{\sqrt{\si}}}}}}} \end{\sqrt{\sqrt{\sqrt{\sq}}}}}}}} \end{\sqrt{\sqrt{\sq}
Globcom, Incorporated 2100 Sanders Road, Suite 150	
Northbrook, Illinois 60062	3. Service Type EX Certified Mall Registered Return Receipt for Merchandise C.O.D.
<u> </u>	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label) 7003 311	.D 0004 0200 7198
PS Form 3811, February 2004 Domestic Retu	ım Receipt 102595-02-M-1540

XC-2004-0051