

RECEIVED--FPSC

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COMMISSION
CLERK

| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY | |
|--|---|--|
| <ul style="list-style-type: none">■ 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 <input checked="" type="checkbox"/> <i>J. Moore</i> | <input type="checkbox"/> Agent <input type="checkbox"/> Addressee |
| 1. Article Addressed to: <i>120000-OT 00425-12</i> | B. Received by (<i>Printed Name</i>) <i>J. Moore</i> | C. Date of Delivery <i>4-26-12</i> |
| BETTYE J WILLIS VICE PRESIDENT WINDSTREAM COMMUNICATIONS STATE GOVERNMENT AFFAIRS 13560 MORRIS RD STE 2500 MILTON GA 30004 | D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No | |
| | 3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. | |
| 2. Article Number (Transfer from service label) | 4. Restricted Delivery? (<i>Extra Fee</i>) <input type="checkbox"/> Yes | |
| PS Form 3811, February 2004 | 7009 3410 0002 4112 8277 | Domestic Return Receipt |

DOCUMENT NUMBER-DATE
02699 APR 30 2012
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