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COMPLETE THIS SECTION ON DELIVERY ☐ Agent☐ Addres C. Date of Del ived by (Printed Name) ☐ Yes D./ is delivery address different from item 1? If YES, enter delivery address below: BETTYE J WILLIS VICE PRESIDENT WINDSTREAM COMMUNICATIONS INC 3. Service Type Certified Mail ☐ Registered ☐ Return Receipt for Merch ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes 3500 0001 5979 4400 Domestic Return Receipt 102595-02-M-1540



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SENDER: COMPLETE THIS SECTION

or on the front if space permits.

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

1. Article Addressed to: \30000 - OT

STATE GOVERNMENT AFFAIRS

13560 MORRIS RD STE 2500

MILTON GA 30004

(Transfer from service label) PS Form 3811, February 2004

2. Article Number

WINDSTREAM COMMUNICATIONS INC STATE GOVERNMENT AFFAIRS BETTYE J WILLIS VICE PRESIDENT MILTON GA 30004 3560 MORRIS RD STE 2500

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