SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. 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 B. Received by (Printed Name) Date of Delivery
1. Article Addressed to: Docket 20160119-TP DNs 04146-2016, 04148-2016 Windstream ATTN: Jeff Heacox 4001 Rodney Parham Drive Little Rock, AR 72212	D. Is delivery address different from item 1? If YES, enter delivery address below:
9590 9402 2900 7094 5678 70 2. Article Number (<i>Transfer from service label</i>) 7017 0530 0001 1254 2356	3. Service Type □ Adult Signature □ Adult Signature Restricted Delivery □ Certified Mail® □ Certified Mail Restricted Delivery □ Collect on Delivery □ Collect on Delivery Restricted Delivery □ collect on Delivery Restricted Delivery □ nsured Mail □ nsured Mail Restricted Delivery ○ over \$500) □ Priority Mail Express® □ Registered Mail Restricted Delivery □ Registered Mail Restricted Delivery □ Signature Confirmation □ Signature Confirmation □ Restricted Delivery
PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt