**SENDER: *COMPLETE THIS SECTION***

- 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.

1. Article Addressed to:

Touch America
130 N. Main Street
Butte, MT 59701

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature
X Kevin P. Dennehy ☒ Agent ☐ Addressee

B. Received by (Printed Name) Kevin P. Dennehy
C. Date of Delivery 7-8-4

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☒ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. 7003 2260 0003 3128 5510

T-01051B-03-0454

PS Form 3811, August 2001 Domestic Return Receipt T-00000D-00-0672 102595-02-M-1540

• Sender: Please print your name, address, and ZIP+4 in this box •

RECEIVED
2004 JUL 12 AM 11:55
Arizona Corporation Commission
Docket Control / Hearing
1200 W. Washington
AZ CORP COMMISSION
DOCUMENT CONTROL Phoenix AZ 85007 Arizona Corporation Commission

DOCKETED
JUL 1 2 2004
DOCKETED BY

JUL 8 2004

UNITED STATES POSTAL SERVICE

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

0000003587