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 402 W. Broadway, 21st Floor
 San Diego, CA 92101

CERTIFIED MAIL™



7008 1300 0000 7039 9757
 7008 1300 0000 7039 9757



GENERAL MANAGER/OFFICE MANAGER
 ANTILLES WIRELESS LLC
 COMMUNITY ID#: CA1634
 2123 CENTRAL AVE, SUITE 200
 KEARNEY, NE 68848

**U.S. Postal Service™
 CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only: No Insurance Coverage Provided)**

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
 Here

GENERAL MANAGER/OFFICE MANAGER

Sent to
 ANTILLES WIRELESS LLC
 COMMUNITY ID#: CA1634
 Street, Apt. No., 2123 CENTRAL AVE, SUITE 200
 or PO Box No. KEARNEY, NE 68848
 City, State, Zip+4

PS Form 3800, August 2005

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>X</p>	
<p>1. Article Addressed to:</p> <p>GENERAL MANAGER/OFFICE MANAGER ANTILLES WIRELESS LLC COMMUNITY ID#: CA1634 2123 CENTRAL AVE, SUITE 200 KEARNEY, NE 68848</p>	<p>B. Received by (<i>Printed Name</i>)</p>	<p>C. Date of Delivery</p>
<p>2. Article Number (<i>Transfer from service label</i>)</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>PS Form 3811, February 2004</p>	<p>3. Service Type</p> <p><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.</p>	
	<p>4. Restricted Delivery? (<i>Extra Fee</i>) <input type="checkbox"/> Yes</p>	
<p style="text-align: center;">7008 1300 0000 7039 9757</p>		

Certified Mail

- A mailing receipt
- A unique identification number
- A record of delivery

Important Reminder:

- Certified Mail is not returnable to sender.
- NO INSURANCE for valuable contents. Please use Registered Mail for valuable contents.
- For an additional delivery receipt, please purchase a duplicate return receipt.

- For an additional address, please use the endorsement "Return to addressee at alternate address."
- If a postmark is required, please use a postmark.

IMPORTANT: See

PS Form 3800, August 2003