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.

A. Received by (Please Print Clearly)

B. Date of Delivery 9.12.03

C. Signature X [signature] ☐ Agent ☐ Addressee

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

1. Article Addressed to:
* 03-192
Mid-America Radio of Indiana, Inc.
P.O. Box 1970
.. Wayne Street
..artinsville,, IN 47807

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Copy from service label)
7002-0510-0003-8378-2899

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

DOCKET NO. 03-192

ORDER DATED 9-5-03
DA 03-2753
MIMEOGRAPH NO.

CERTIFIED MAIL

RECEIVED SEP 08 2003 FCC-MAILROOM

RETURN RECEIPT REQUESTED

NAME * 03-192
Mid-America Radio of Indiana, Inc.
P.O. Box 1970
60 N. Wayne Street
Martinsville,, IN 47807

C. R. R. NO.

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

Postage	$ 66
Certified Fee	2.[illegible]
Return Receipt Fee (Endorsement Required)	1.[illegible]
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 4.65

Postmark Here

HAMPTON FIN UNIT CAPITAL HGTS SEP 09 2003 MD-USPS-2079

Sent To Mid-America Radio of Indiana
Street, Apt. No. or PO Box No. P.O. Box 1970 60-N Wayne
City, State, ZIP+4 Martinville IN 47807

PS Form 3800, January 2001 See Reverse for Instructions

7002 0510 0003 8378 2899