4 2016

Missouri Public Service Commission

SENDER: COMPLETE THIS SECTION

- 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.

Western District Court of Appeals 1300 Oak Street Kansas City, MO 64106-2970



2 Article Number (Transfer from service label) 70l2 2920 0002 O666 5457

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A. Signature

B. Received by (Printed Name)

Agent Addressee

Date of Delivery

D. Is delivery address different from item-If YES, enter delivery address below:

- 3. Service Type

- ☐ Insured Mail
 ☐ Insured Mail Restricted Delivery
 (over \$500)
- ☐ Priority Mail Express®
- □ Adult Signature
 □ Adult Signature Restricted Delivery
 □ Certified Mail Restricted Delivery
 □ Certified Mail Restricted Delivery
 □ Collect on Delivery
 □ Collect on Delivery
 □ Collect on Delivery Restricted Delivery
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Domestic Return Receipt

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PM 21

Missouri Public Service Commission

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