
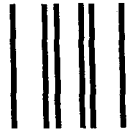


ER-2012-0166 2/1/13

<b>SENDER INFORMATION</b>		<b>RECEIVER INFORMATION</b>	
<input checked="" type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. <input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.		<b>A. Signature</b> X  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
<b>1. Article Addressed to:</b>		<b>B. Received by (Printed Name)</b>	<b>C. Date of Delivery</b> 2/4/13
Western District Court of Appeals 1300 Oak Street Kansas City, MO 64106-2970		<b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
		<input type="checkbox"/> Registered Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> C.O.D.	
		<b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes	
<b>2. Article Number</b> (Transfer from service label)		7008 2810 0001 2932 8690	
PS Form 3811, February 2004		Domestic Return Receipt	
		102595-02-M-1540	

**FILED**  
FEB 8 2013  
Missouri Public  
Service Commission

UNITED STATES POSTAL SERVICE		First-Class Mail Postage & Fees Paid USPS Permit No. G-10
<p>• Sender: Please print your name, address, and ZIP+4 in this box •</p> <p>MO Public Service Commission Data Center P.O. Box 360 Jefferson City, MO 65102-0360</p>		