| | | | MC-2018-0236 3/1/18 |
|--------------------|---|---|---|
| | SENDER: COMPLETE | THIS SECTION | COMPLETE THIS SECTION ON DELIVERY |
| 2 | Complete items 1, 2, a | | A, Signature |
| | Print your name and a so that we can return the so that we can return the source of | | A hh Watter Addressee |
| | Attach this card to the or on the front if space | | B. Received by (Printed Name) C. Date of Delivery |
| MAR 6 2018 | 1. Article Addressed to: | | D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No |
| Missouri Public | n Michael Goodwi | n | |
| Service Commission | 621 Blue Bunting Circle | | |
| | Moscow Mills, N | 10 63362 | |
| | | N ITA IAKI MITANIMITA (MIL | 3. Service Type □ Priority Mail Express® □ Adult Signature □ Registered Mail™ |
| | | | Adult Signature Restricted Delivery Certified Mail® Delivery |
| | 9590 9402 1289 | | Cortified Mail Restricted Delivery Collect on Delivery Collect on Delivery Restricted Delivery Signature Confirmation |
| | 2. Article Number (Transfer f 7012 2920 000 | the second se | Insured Mail Restricted Delivery Signature Confirmation Insured Mail Restricted Delivery Restricted Delivery |
| | PS Form 3811, July 201 | | (over \$500) Domestic Return Receipt |
| | 1 (17) | | |
| | | | |
| | USPS | TRACKING# | |
| | | | First-Class Mail Postage & Fees Paid |
| | | | USPS Permit No. G-10 |
| | | | |
| | 9590 9402 13 | 289 5285 2787 48 | |
| | United States | Sonder: Plasse print | your name address and 7IP+4® in this box® |
| | Postal Service | | |
| | | | vice Commission |
| | | Data Center | |
| | | P.O. Box 360 | |
| | | Jefferson City, | MO 65102-0360 |
| | | | |
| | | | |
| | -036060 | u u | |
| | | | * |
| | | 11 | * |