

FILED

JAN 26 2015

Missouri Public Service Commission

SA 305-005 11/15

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.

1. Article Addressed to:

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

2. Article Number

(Transf. 7012 2920 0002 0666 8250

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Rocky Ball

- Agent
- Addressee

B. Received by (Printed Name)

Rocky Ball

C. Date of Delivery

1/20/15

D. Is delivery address different from item 1? If YES, enter delivery address below

- Yes
- No

3. Service Type

- Certified Mail
- Express Mail
- Registered
- Return Receipt for Merchandise
- Insured Mail
- C.O.D.

4. Restricted Delivery? (Extra Fee)

- Yes

UNITED STATES POSTAL SERVICE

KANSAS CITY
 MO 64106
 20 JAN '15
 0471



First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. 10

• Sender: Please print your name, address, and ZIP+4 in this box •

MO Public Service Commission
 Data Center
 P.O. Box 360
 Jefferson City, Mo 65102-0360

