

2-20-04 TC-2004-0408

**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:

Norris E. Greer  
120 W. 12<sup>th</sup>  
Kansas City, MO 64105

 2. Article Number  
(Transfer from s

7001 1940 0002 6942 6171

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X ☐ Agent☐ Addressee

B. Received by (Printed Name)

MS Phillips

C. Date of Delivery

2/23

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ 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



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

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

MO PUBLIC SERVICE COMMISSION  
P.O. BOX 360  
JEFFERSON CITY, MO 65102

Missouri Public  
Service Commission

MAR 02 2004

FILED<sup>2</sup>