

112-15-10 EL-10-0355 & EL-10-0356

FILED

DEC 20 2010

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> M. Selby <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____</p> <p>C. Date of Delivery  12/19</p>
<p>1. Article Addressed to:</p> <div style="border: 1px dashed black; padding: 10px; margin: 10px 0;"> <p>ERUCES Inc.  Attn: Robert Wagner  11142 Thompson Ave,  Lenexa, KS 66219</p> </div>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No  If YES, enter delivery address below:</p> <p>3. Service Type  <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) <b>7008 2810 0001 2932 9093</b></p>	
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02M-1540</p>	

Missouri Public Service Commission

UNITED STATES POSTAL SERVICE **JEFFERSON CITY 644**

18 DEC 2010 PM 3:12

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  
Data Center  
P.O. Box 360  
Jefferson City, MO 65102-0360

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