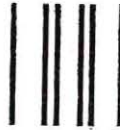


UNITED STATES POSTAL SERVICE

KANSAS CITY
MO 640

09 AUG '19



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

USPS TRACKING#



9590 9403 0422 5163 8701 13

FILED³

AUG 13 2019

Missouri Public
Service Commission

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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.

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



9590 9403 0422 5163 8701 13

2. Article Number (Transfer from service label)

7017 3040 0000 1345 3532

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Kathy St John* Agent
 Addressee

B. Received by (Printed Name)

KATHY ST JOHN

C. Date of Delivery

8/13/19

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

W0-2019-0184 8/7/19