SENDER: COMPLETE THIS SECTION	EC-05-146 11/30/04 COMPLETE THIS SECTION ON DELIVERY
 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. Article Addressed to: 	A. Signature JE SIMMIONS QUICK DELIVERY B. Rectified Manager C. Date of Delivery D. Is delivery address different from item 1?
Kansas City Power & Light Co. Legal Department P.O. Box 418679 Kansas City, MO 64141	3. Service Type Certified Mail
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7003 311	.0 0004 0200 6573
PS Form 3811, August 2001 Domestic Re	sturn Receipt 102595-02-M-1540

* Sender: Please print your name, address, and EIP+4 in this box * Permit No. G-10

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