

FILED<sup>3</sup>

JUN 09 2015

Missouri Public Service Commission

EX-2014-0258 6/2/15

**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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

*Brenda J. Hasty*

Agent

Addressee

B. Received by (Printed Name)

*Brenda J. Hasty*

C. Date of Delivery

*6/4/15*

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

2. Article Number

(Transfer from ser)

7012 2920 0002 0666 4054

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

UNITED STATES POSTAL SERVICE

KANSAS CITY  
MO 640

04 JUN '15

PM 7 L



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

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

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

POSTAL REGISTER

