U	NITED	STATES	POSTAL	SERVICE
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PS Form 3811, February 2004



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 JUL 2.7 2012

102595-02-M-1540

	ER-2012-0024 7/23	
SENDER: COMPLETE THIS SECTION	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 	A Signature X Coloressee	
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.	B. Received by (Printed Name) C. Date of Delivery	
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:	
Western District Court of Appeals		
Court Clerk 1300 Oak Street Kansas City, MO 64106-2970	3. Service Type Certified Meli Registered Return Receipt for Merchandise C.O.D.	
**************************************	4. Restricted Delivery? (Edita Fee)	
2. Article Number 7008 2830	0007 2932 A9A0	

Domestic Return Receipt