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 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. 	A. Signature X Agent Addressee B. Received by (Printed Name) C. Date of Delivery 11/19/08	
1. Article Addressed to: OWA - 07 - 2008 - 007 #	D. Is delivery address different from item 1?	
Daniel G. Miller, P.E. City of Overland Park 8500 Santa Fe Drive Overland Park, Kansas 66212	3. Service Type 3. Service Type 2. Certified Mail	
(Transfer Hort	4. Restricted Delivery? (Extra Fee) 'D' Yes	
PS Form 3811, February 2004 Domestic R	leturn Receipt 102595-02-M-1540	