

**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:

Clayton - Neb  
CERCLA-07-2006-0159  
Scott Young  
Polsinelli Shalton & Welte P.C.  
700 W. 47th Street  
Kansas City, MO 64112

2. Article Number  
(Transfer from se)

7004 2510 0006 9720 9213

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*J. Reed*

- Agent  
 Addressee

B. Received by (Printed Name)

*J. Reed*

C. Date of Delivery

*04-14-07*

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