

| SENDER: COMPLETE THIS SECTION  | COMPLETE THIS SECTION ON DELIVERY  |
|--|--|
| <ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul> | A. Signature <input checked="" type="checkbox"/> Agent<br><input checked="" type="checkbox"/> Addressee  |
| 1. Article Addressed to:<br><br>Robert Lambrechts, Esq.<br>Lathrop & Gage L.C.<br>10851 Mastin Boulevard<br>Building 82, Suite 1000<br>Overland Park, Kansas 66210-1669  | B. Received by (Printed Name) C. Date of Delivery<br>JESSICA McELHANEY 4-24-08   |
| 2. Article Number<br>(Transfer from service label)   | D. Is delivery address different from item 1? <input type="checkbox"/> Yes<br>If YES, enter delivery address below: <input type="checkbox"/> No  |
|  | 3. Service Type<br><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail<br><input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise<br><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. |
|  | 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes   |
| 7006 2760 0000 8650 0618   |  |
| PS Form 3811, February 2004  | Domestic Return Receipt 102595-02-M-1540   |

**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)  
 For delivery information visit our website at [www.usps.com](http://www.usps.com)

7006 2760 0000 8650 0618

|  |   |
|--|---|
| Postage \$                                     | 4/24/08<br>Postmark Here  |
| Certified Fee                                  |   |
| Return Receipt Fee (Endorsement Required)      |   |
| Restricted Delivery Fee (Endorsement Required) |   |
| Total Postage                                  |   |
| Sent To  | Robert Lambrechts, Esq.<br>Lathrop & Gage L.C.<br>10851 Mastin Boulevard<br>Building 82, Suite 1000<br>Overland Park, Kansas 66210-1669 |
| Street, Apt. No. or PO Box No.                 |   |
| City, State, ZIP                               |   |

PS Form 3800, August 2006 See Reverse for Instructions