



**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: Scherer  
CWA-07-2006-0241

Mr. G. Edgar James  
 Shughart Thomson & Kilroy  
 Twelve Wyandotte Plaza  
 120 West 12<sup>th</sup> Street  
 Kansas City, Missouri 64105

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature: [Signature]  Agent  Address
- B. Received by (Printed Name) \_\_\_\_\_ C. Date of Delivery 10-20-06
- D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below: \_\_\_\_\_

- Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number  
 (Transfer from service label)

7004 2510 0006 9719 7930

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

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)®

**OFFICIAL USE**

7004 2510 0006 9719 7930

Postage	\$	
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

Postmark  
Here

Sent 7  
 Street, or PO,  
 City, St. Mr. G. Edgar James  
 Shughart Thomson & Kilroy  
 Twelve Wyandotte Plaza  
 120 West 12<sup>th</sup> Street  
 Kansas City, Missouri 64105