

**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:

CWA-07-2006-040

Ada Brehe Krueger  
Prosecuting Attorney  
Gasconade County  
119 E. 1st Street, Room 2  
Hermann, Missouri 65041

2. Article Number

*(Transfer from service label)*

7004 2510 0006 9719 8104

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*[Handwritten Signature]*  Agent  
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

*[Handwritten Name]* *[Handwritten Date]*

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