

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ 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. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p><i>x Rosie M. See</i></p>	
<p>1. Article Addressed to: <i>Renewal</i></p> <p><i>FIFRA-07-2007-0004</i></p> <p>Richard L. Green, Esq. Stinson Morrison Hecker, LLP 1201 Walnut, Suite 2900 Kansas City, Missouri 64106</p>	<p>B. Received by (Printed Name)</p>	<p>C. Date of Delivery</p> <p><i>5/11/07</i></p>
<p>2. Article Number <small>(Transfer from service receipt)</small></p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p>	
<p>PS Form 3811, February 2004</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
<p>7006 2760 0000 8652 1613</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p> <p>Domestic Return Receipt 102595-02-M-1540</p>	