

**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  
*Waste*  
*TSCA-07-2010-0013*

Robert E. Jones  
Jones, Bick, Kistner, Jones & Loren  
1600 So. Hanley Rd., Suite 101  
St. Louis, Missouri 63144

2. Article Number  
(Transfer from serv.) *7006 2760 0000 8646 3104*

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 *[Signature]*  Agent  
 Addressee

B. Received by (Printed Name) *E. Kistner* C. Date of Delivery *10/4/10*

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