

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:

D.J. Gerdt, City Administrator
 City of Plattsburg
 114 Maple Street
 Plattsburg, MO 64477

2. Article Number

(Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *D. Bergstrom* Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

12/26/07

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

7004 2510 0006 9722 0980

3 Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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:

Mark Hubbard, Esq.
 Hubbard & Rehard, P.C.
 500 Third Street
 Platte City, Missouri 64079

2. Article Number

(Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Kathy Anderson* Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

Kathy Anderson

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

7004 2510 0006 9722 0997

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540