

**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: 2/19/09 B.M.  
 PCB 2009-029  
 Leonard Kaplan, R.A.  
 Kaplan Development and Investment Co.  
 P.O. Box 340  
 Saint Peters, MO 63376-0006

2. Article Number  
 (Transfer from service label) 7008 1830 0003 9908 8246

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee  
*Stanley Black*

B. Received by (Printed Name) C. Date of Delivery  
*Stanley Black*

D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No

*PO Box 340*  
 FEB 25 2009  
 5:10 PM

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes