| SENDER: COMPLETE THIS SECTION | | COMPLETE THIS SECTION ON DELIVERY |
|---|-------|---|
| Complete items 1, 2, and 3. Also complet item 4 if Restricted Delivery is desired. Print your name and address on the reverso that we can return the card to you. Attach this card to the back of the mailpie or on the front if space permits. | rse (| A Signature Agent Addressee B. Received by (Printed Name) C. Date of Delivery |
| Article Addressed to: | - | D. Is delivery address different from item 1? |
| Laclede Gas Company Legal Department | | |
| 720 Olive Street St. Louis, MO 63101 | ' | 3. Service Type Certified Mail |
| | | 4. Restricted Delivery? (Extra Fee) ☐ Yes |
| 2. Article Number (Transfer from sen 7004 135 | 50 00 | 03 1351 6544 |

