

FILED<sup>3</sup>

AUG 19 2011

Missouri Public  
Service Commission

GC-12-0013 8/15/11

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:

Laclede Gas Company  
Legal Department  
720 Olive Street  
St. Louis, MO 63101

2. Article Number

(Transfer from service)

7008 2810 0001 2932 9048

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Ken [Signature]*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

8.17.11

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

UNITED STATES POSTAL SERVICE

ST. LOUIS, MO 63101  
17 AUG 11 PM 10 7

First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

- Sender: Please print your name, address, and ZIP+4 in this box •

MO Public Service Commission  
Data Center  
P.O. Box 360  
Jefferson City, MO 65102-0360