WC-14-0188 COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION DEC 23 2013 ■ 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 your Missouri and the sound so that we can return the card to your missouries and the sound sound so that we can return the card to your missouries and the sound s □ Agent ☐ Addressee Missouri Public so that we can return the card to you.

Service Commission Aftach this card to the back of the mailpiece, or on the front if space permits C. Date of Delivery ☐ Yes D. Is delivery address different from item 1? If YES, enter delivery address below: 1. Article Addressed to: Missouri-American Water Company **Legal Department** Service Type 727 Craig Road ☐ Express Mail ☐ Certifled Mail St. Louis, MO 63141 ☐ Return Receipt for Merchandise ☐ Registered Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

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

Domestic Return Receipt

7012 2920 0002 0666 7680

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