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	A STATE OF THE STA	and the second second	EC-2013-0278 1/3	1/13
	SENCE			
	 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, 		A. Signature X B. Received by (Printed Name)	Agent Addresses C. Date of Delivery
	or on the front if space permits		D. is delivery address different from iter	n 1? ☐ Yes
	Article Addressed to:		If YES, enter delivery address below	
			<u>{</u>	
	Empire District Electric Legal Department 602 S. Joplin Avenue P.O. Box 127 Joplin, MO 64802	c Company, Th	I. Service Type La Certified Mail	il elpt for Merchandle
	Jopini, MO 04002		☐ Insured Mail ☐ C.O.D. 1-4. Restricted Delivery? (Extra Fee)	☐ Yes
•	2. Article Number (Transfer from service label)	7008 2810		
	PS Form 3811, February 2004	Domestic Re	sturn Receipt	102595-02-M-15
FEB 8 2013 Missouri Public Prvice Commission	'n			
UN	ITED STATES POSTAL SERVICE		First-Class Mail Postage & Fees F USPS Permit No. G-10	Paid
	Sender: Please print your	name, address	s, and ZIP+4 in this box •	
		the second second second second		
	MO Public Service Data Center P.O. Box 360 Jefferson City, N			