

| <u></u> | |
|--|---|
| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY |
| 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. | A Bignature Agent Addressee B. Received by (Printed Name) C. Date of Delivery |
| Article Addressed to: | D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No |
| Union Electric Company Legal Department 1901 Chouteau Ave., MC 17301 St. Louis, MO 63166-6149 | Certified Mail |
| @/L00 | ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes |
| 2. Article Number 7001 1940 0002 [| -942 6 522 |
| PS Form 3811, August 2001 Domestic F | Return Receipt 102595-02-M-1540 |

GC-2005-0018