JUL 2 1 2009

Missouri Public Service Commission

GC-2010-0018 7/15/09 COMPLETE THIS SECTION ON DELIVERY 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. BL RACENOGED PINET NO PO C. Date of Delivery Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? 1. Article Addressed to: If YES, enter delivery address below: Union Electric Company d/b/a AmerenUE Legal Department 1901 Chouteau Avenue zivice Type Certified Mail St. Louis, MO 63166-6/149 ☐ Express Mail $MO_{\tilde{G}}$ Registered ☐ Return Receipt for Merchandise Insured Mail □ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes 2. Article Number 2000/2006

Domestic Return Receipt

United States Postal Service

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

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