

FILED

SEP 23 2013

Missouri Public  
Service Commission

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 label)

PS Form 3811, February 2004

Domestic Return Receipt

10265-02-M-1540

9/16/13 GC-2014-0072

ADDRESSEE COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

*Denise Sauer*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

*Denise Sauer*

C. Date of Delivery

*9-18-13*

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

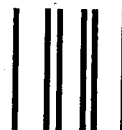
☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

UNITED STATES POSTAL SERVICE



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

