

GC-2008-0158 11/15/07

**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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *James P. [Signature]*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

*James P. [Signature]*

C. Date of Delivery

D. Is delivery address different from item 1? ☒ Yes

If YES, enter delivery address below: ☐ No

16  
2007

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7004 1350 0003 1351 9811

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

UNITED STATES POSTAL SERVICE

SAINT LOUIS MO 631



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

16 NOV 07 PM 06 L

- 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

60

