MISSOURI PUBLIC SERVICE COMMISSION

October 09, 2008

Case No. MC-2009-0127

General Counsel's Office P.O. Box 360 200 Madison Street, Suite 800 Jefferson City, MO 65102 Lewis R. Mills, Jr. P.O. Box 2230 200 Madison Street, Suite 650 Jefferson City, MO 65102

Brookside Homes, Inc. Legal Department 2455 US Highway 67 South Festus, MO 63028

1080

Steven G. Warren Steven Warren 2455 US Highway 67 South Festus, MO 63028

Enclosed find a certified copy of a NOTICE in the above-numbered case(s).

U.S. Postal S CERTIFIED (Domestic Mail O) WAI nly: No li	L, RE Isutance	Coverage Pro	CATHOLICA PROPERTY AND
For delivery informs	6 676	IAI	e at www.usps.	Komo
Postage	\$			
Certified Fee Return Receipt Fee (Endorsement Required)	-	:	Posti He	
Restricted Delivery Fee (Endorsement Required)				
Otavian Mi				

Sincerely,

Sincerely,

Colleen M. Dale
Secretary

Steven Warren 2455 US Highway 67 South Festus, MO 63028

PS Form 3800, August 2006

See November of the market of the



Brookside Homes, Inc Legal Department 2455 US Highway 67 South Festus, MO 63028

PS Form 3800 August 2006

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: Brookside Homes, Inc Legal Department 2455 US Highway 67 South Festus, MO 63028	A. Signature A. Signature A. Signature B. Redeived by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? If YES eigher delivery address below: OCT 1 2000 3. Service Type S P S Certified Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee)
2. Article Number 7007 0710 Cransfer from service labe Domestic Re	0002 2048 1056 sturn Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY A. Signature
 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. 	B. Regeived by (Printed Name) C. Date of Delivery D. Is delivery address different from Item 17 If yES enter delivery address below:
1. Article Addressed to:	OCT 1 1 2008
Steven Warren 2455 US Highway 67 South Festus, MO 63028	3. Service Type (Certified Mail Express Mail Registered Return Receipt for Merchandist Insured Mail C.O.D.
	4. Restricted Delivery? (Extra Fee)
2. Article Number 700	, 0570 0005 5049 0307
Z. Attack from service label)	estic Return Receipt 102595-02-M-18