

MISSOURI PUBLIC SERVICE COMMISSION
February 20, 2007

Case No. WC-2007-0303

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

Aqua Missouri, Inc. (CU)
Legal Department
5402 Business Highway, Ste. 3
Jefferson City, MO 65102

Edward P. Storey
Mark Ludwig
515 East High Street
P.O. Box 28
Jefferson City, MO 65102

Greater Jefferson City Instruction
Company
Mark Ludwig
515 East High Street
P.O. Box 28
Jefferson City, MO 65102

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

7005 0390 0003 2886 3183

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
<i>(Domestic Mail Only; No Insurance Coverage Provided)</i>	
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Certified Fee	
Return Receipt Fee (Endorsement Required)	
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Sent To	...
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City, State, Zip	...
PS Form 3800, June 2002	

Sincerely,


Colleen M. Dale
Secretary

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:

Aqua Missouri, Inc. (CU)
Legal Department
5402 Business Highway, Ste. 3
Jefferson City, MO 65102

COMPLETE THIS SECTION ON DELIVERY

A. Signature  ☐ Agent
☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

FEB 23 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)

7005 0390 0003 2886 3183

PS Form 3811, February 2004

Domestic Return Receipt

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MA