

FILED

JUL 26 2013

Missouri Public
Service Commission

WC-2014-0018 7/22/2013

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:

City of Pevely, Missouri
Legal Department
401 Main Street
Pevely, MO 63070-3309

A. Signature

X *Marilyn Green*

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Marilyn Green

C. Date of Delivery

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

2. Article Number
(Transfer from service label)

7008 2810 0001 2932 8898

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-00-1540

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

