

MISSOURI PUBLIC SERVICE COMMISSION

March 24, 2006

Case No. WC-2006-0363

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

Franklin County Service Company
Harold Horsely
6934 South Lindberg
St. Louis, MO 63125

Hansen, Stierberger, Downard,
Melenbrink & Schroeder
Jonathan Downard
80 North Oak Street
Union, MO 63084

Melody Lake Ranch Associates, Inc.
Gerald Johnston
333 Playmor Drive
Leslie, MO 63056

Melody Lake Water & Sewer LLC
Gerald Johnston
333 Playmor Drive
Leslie, MO 63056

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

Sincerely,



Colleen M. Dale
Secretary

7005 0390 0003 2881 2778

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Post	

Postmark
Here

Sent To Hansen, Stierberger, Downard,
Melenbrink & Schroeder
Jonathan Downard
80 North Oak Street
Union, MO 63084

PS Form 3800, June 2002

See Reverse for Instructions

7005 0390 0003 2881 2761

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Post	

Postmark
Here

Sent To Franklin County Service Company
Harold Horsely
6934 South Lindberg
St. Louis, MO 63125

PS Form 3800, June 2002

See Reverse for Instructions

7005 0390 0003 2881 2785

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	

Postmark
Here

Sent To Melody Lake Ranch Associates, Inc.
Melody Lake Water & Sewer LLC
Gerald Johnston
333 Playmor Drive
Leslie, MO 63056

PS Form 3800, June 2002

See Reverse for Instructions

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:

Franklin County Service Company
Harold Horsely
6934 South Lindberg
St. Louis, MO 63125

2. Article Number
(Transfer from service label)

7005 0390 0003 2881 2761

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☐ Agent
☒ Addressee
- B. Received by (Printed Name) C. Date of Delivery
MAR 28 2006
- D. Is delivery address different from Item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

MAR 28 2006

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

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:

Melody Lake Ranch Associates, Inc.
Melody Lake Water & Sewer LLC
Gerald Johnston
333 Playmor Drive
Leslie, MO 63056

2. Article Number
(Transfer from service label)

7005 0390 0003 2881 2785

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☐ Agent
☒ Addressee
- B. Received by (Printed Name) C. Date of Delivery
Gerald Johnston 3-27-06
- 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

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:

Hansen, Stierberger, Downard,
Melenbrink & Schroeder
Jonathan Downard
80 North Oak Street
Union, MO 63084

2. Article Number
(Transfer from service label)

7005 0390 0003 2881 2778

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☐ Agent
☒ Addressee
- B. Received by (Printed Name) C. Date of Delivery
Liz Smith
- 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