	WC-2011-0341 4/18/11
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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: 	A. Signature X Agent Addressee B. Received by (Printed Name) D. Is delivery address different from item 1? If YES, enter delivery address below:
Missouri-American Water Cor	
Legal Department 727 Craig Road St. Louis, MO 63141	3. Service Type ☐ Certified Mall ☐ Express Mall ☐ Registered ☐ Return Recelpt for Merchandise ☐ Insured Mail ☐ C.O.D.
33. 233, 1113 33 11	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7008 283	10 0001 2932 9055

PS Form 3811, February 2004

Domestic Return Receipt

