## JUL 1 9 2018

Missouri Public Service Commission

SENDER: COMPLETE THIS SECTION	COC-19-4 7-5-18  COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature
Missouri-American Water Compa	If YES, enter delivery address below

Legal Department

727 Craig Road St. Louis, MO 63141

9590 9402 3592 7305 8674 63

2. Article Number (Transfer from service label)

7017 3040 0000 1345 2689

PS Form 3811, July 2015 PSN 7530-02-000-9053

3. Service Type ☐ Adult Signature

- ☐ Adult Signature Restricted Delivery
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