

FILED²

NOV 14 2017

Missouri Public
Service Commission

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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.

Missouri-American water Company
Attn: Diana C. Carter
312 E. Capitol Avenue
P.O. Box 456
Jefferson City, MO 65102



9590 9402 1289 5285 2787 79

2. Article Number (Transfer from service label)

7012 2920 0002 0666 4658

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]

☐ Agent

☐ Addressee

B. Received by (Printed Name)

James Middleton

C. Date of Delivery

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

3. Service Type

- | | |
|--|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input checked="" type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail | |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) | |

Domestic Return Receipt

USPS TRACKING #



9590 9402 1289 5285 2787 79

United States
Postal Service

* 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

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

