WIC 2023-0106 912012022 COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature ■ Complete items 1, 2, and 3. **Agent** ■ Print your name and address on the reverse □ Addressee so that we can return the card to you. Date of Delivery B. Received by (Printed Name) Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No Missouri-AmericanWater Company Legal Department 727Craig Road St. LouisMO63141 Service Type ☐ Priority Mail Express® ☐ Adult Signature ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Registered Mail™ Registered Mail Restricted Delivery Return Receipt for Merchandise Signature Confirmation™ Signature Confirmation ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery 2. Article Number (Transfer from service label) ☐ Insured Mail ☐ Insured Mail Restricted Delivery (over \$500) Restricted Delivery 7017 3040 0000 1345 4720 PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

Missouri Public Service Commission

