	grand and the second se	· · The try de to the sign of the transfer of the sign	1 10 A	G0 / 0	
	SCMA		2-13-03	80 1-3	1-10
	<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</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  X		
	1. Article Addressed to:		<ul><li>D. Is delivery address</li><li>If YES, enter deliv</li></ul>	different from item: ery address below:	1? ☐ Yes ☐ No
	Empire District Electric Company, The Legal Department 602 S. Joplin Avenue P.O. Box 127 Joplin, MO 64802		3. Service Type  Certified Mail Registered Insured Mail Restricted Deliver	Express Mail Return Receip C.O.D.	
	2. Article Number		ro coor 5.		☐ Yes
-	(Transfer from service label) PS Form 3811, February 2004	Domestic Return			102595-02-M-154
Missouri Public Service Commission	on .	1 11	111 1		
	United States Postal Service			First-Class Ma Postage & Fe USPS Permit No. G-	es Paid
	Sender: Please print yo	ur name, addre	ss, and ZIP+4	in this box⁻●	
	MO Public Serv	vice Commi	ssion		
	Data Center P.O. Box 360				
	Jefferson City,	MO 65102-	-0360		
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