

FILED

APR 04 2024

Missouri Public
Service Commission

3/29/2024 WC-2024-0258	
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 727 Craig Road St. Louis, MO 63141	
 9590 9402 5102 9092 5766 60	
2. Article Number (Transfer from service label) 7019 0700 0000 9367 4324	
PS Form 3811, July 2015 PSN 7530-02-000-9053	
COMPLETE THIS SECTION ON DELIVERY	
A. Signature 	
☒ Agent ☐ Addressee	
B. Received by (Printed Name) D. Bloehwood	
C. Date of Delivery 4-1-24	
D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Insured Mail Restricted Delivery (over \$500)	
☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery	
Domestic Return Receipt	

USPS TRACKING#	
 9590 9402 5102 9092 5766 60	
First-Class Mail Postage & Fees Paid USPS Permit No. G-10	
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	
	