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MAY 21 2024

Missouri Public
Service Commission

| SENDER: COMPLETE THIS SECTION | | COMPLETE THIS SECTION ON DELIVERY | |
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| <ul style="list-style-type: none">■ 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. | | <p>GC-2024-0311 4/23/24</p> | |
| <p>1. Article Addressed to:</p> <p>Spire Missouri, Inc. Legal Department 700 Market Street, 6th Floor St. Louis, MO 63101</p> <p>9590 9402 5102 9092 5767 38</p> | | <p>A. Signature X <i>SP128</i></p> <p><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> | |
| <p>2. Article Number (Transfer from service label) 7019 0700 0000 9367 4386</p> | | <p>B. Received by (Printed Name)</p> <p>C. Date of Delivery</p> | |
| <p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p> | | <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> | |
| PS Form 3811, July 2015 PSN 7530-02-000-9053 | | Domestic Return Receipt | |

| USPS TRACKING# | |
|---|--|
| <p>9590 9402 5102 9092 5767 38</p> | <p>First-Class Mail Postage & Fees Paid USPS Permit No. G-10</p> |
| <p>United States Postal Service</p> | <p>• Sender: Please print your name, address, and ZIP+4® in this box•</p> <p>MO Public Service Commission Data Center P.O. Box 360 Jefferson City, MO 65102-0360</p> |