

GC-2026-0278 4/24/26

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.

1. Article Addressed to: _____



Spire Missouri, Inc.
Legal Department
700 Market Street
St. Louis, MO 63101



9590 9402 5102 9092 5774 52

2. Article Number (Transfer from service label)

7019 0700 0000 9367 4799

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

X

B. Received by (Printed Name) C. Date of Delivery

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

3. Service Type Priority Mail Express®
 Registered Mail™

- Adult Signature Registered Mail Restricted Delivery
- Adult Signature Restricted Delivery Registered Mail Restricted Delivery
- Certified Mail® Return Receipt for Merchandise
- Certified Mail Restricted Delivery Signature Confirmation™
- Collect on Delivery Signature Confirmation Restricted Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

FILED

MAY 01 2026

Missouri Public Service Commission

USPS TRACKING#



9590 9402 5102 9092 5774 52

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

