

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

QWA-07-2011-0086

Randall R. Beavers, P.E.
 CEO and General Manager
 Des Moines Water Works
 2201 George Flagg Parkway
 Des Moines, Iowa 50321-1190

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Received by (Printed Name)

 Agent
 Addressee

C. Date of Delivery

10-4-11

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below:

 No

1102 + 120

3. Service Type

- Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number

(Transfer from service label)

7004 2510 0006 9725 6262

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-11-1540