

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.

Dominion East Ohio Gas Co.
Jean DeMarr
1201 E. 55th Street
Cleveland, OH 44101

08-155-GA-CSS

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

x Mary L. Fleming-Bey

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

MARY L. FLEMING-BEY

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

3. Service Type

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

4. Restricted Delivery? (Postage Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7007 2680 0001 0490 9069

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540