

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:

Mr. Ron Brodzinski
Mayor and Clerk of Council
City of New Philadelphia
116 E. High Ave.
New Philadelphia, OH 44663

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *M. J. Brodzinski*

☐ Agent

☐ Addressee

B. Received By (Printed Name)

M. J. Brodzinski

C. Date of Delivery

2/1/04

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below: ☐ No

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)

7007 2680 0001 0491 3066

UNITED STATES POSTAL SERVICE

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

PUBLIC UTILITIES COMMISSION OF OHIO
1515 BROAD STREET
COLUMBUS, OHIO
43260-7736
DOCKETING DIVISION

PUCO

2008 MAY 28 AM 11:45

RECEIVED-DOCKETING

4-9-08, 8:20, 931