

**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. Robert Conner  
Mayor and Clerk of Council  
Village of Cridersville  
110 W. Main St.  
Cridersville, OH 45806

2. Article Number  
(Transfer from:)

7007 2680 0001 0490 9335

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *[Signature]*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

*[Signature]*

C. Date of Delivery

8-22-00

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

UNITED STATES POSTAL SERVICE

LIMA OH 45802

LET US DARE TO BE DIFFERENT  
THINK, SPEAK, USE, WRITE.  
Postage & Fees Paid  
Permit No. G-10

07 MAY 2003 PM 1 Y

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

RECEIVED DOCKETING DIVISION

07 MAY 2003 PM 1 Y

O

PUBLIC UTILITIES COMMISSION OF OHIO

130 S. BROAD STREET

COLUMBUS, OHIO

43260-3793

DOCKETING DIVISION

67-829  
830  
831

