

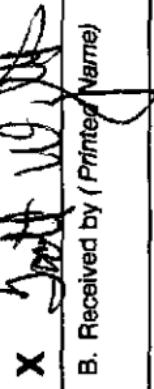
SENDER: COMPLETE THIS SECTION**COMPLETE THIS SECTION ON DELIVERY**

- 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:

COUGAR'S VALLEY EXPRESS, INC
824 KINGSDALE RD
STEUBENVILLE OH 43952

08-853-TR-CVF

A. Signature Agent
 Addressee**B. Received by (Printed Name)** C. Date of Delivery

7-2-09

**D. Is delivery address different from item 1? Yes
 No**

If YES, enter delivery address below:

RECEIVED

2000 JUL

T

3. Service Type	<input checked="" type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail
	<input type="checkbox"/> Registered	<input type="checkbox"/> Return Receipt for Merchandise
	<input type="checkbox"/> Insured Mail	<input type="checkbox"/> COD

4. Restricted Delivery? (Extra Fee)	<input type="checkbox"/> Yes
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Z

2
7007 0220 0000 2272 57872.
Article Number
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

UNITED STATES POSTAL SERVICE

YOUNG EROTIC NOVELS

21 JUL 2008 PPL

First-Class Mail
Postage & Fees Paid
U.S.
Post No. G-10

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

Public Utilities Commission of Ohio
180 E. Broad St.
Columbus, Ohio 43215
Docketing Division