

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:

Phil Jackson
Vice-Chairman
Sandusky Township Trustee
5094 Lime Rd.
Galion, OH 44833

2. Article Number

(Transfer from service label)

7007 2680 0001 0486 4436

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

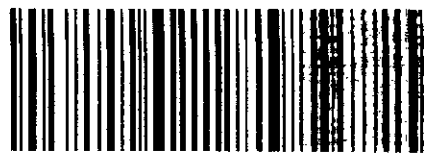
☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

CERTIFIED MAIL™



7007 2680 0001 0486 4436

OSTAGE » PITNEY BOWE

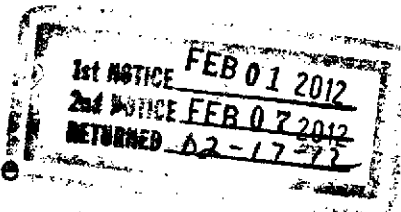
3215 \$ 005.95
W. 372587 JAN 31 201

The Public Utilities Commission of Ohio
180 East Broad Street
Columbus, OH 43215-3793

ADDRESS SERVICE REQUESTED

11-4161-NS-AIR

Phil Jackson
Vice-Chairman
Sandusky Township Trustee
5094 Lime Rd.
Galion, OH 44833



UNCLAIMED

RECEIVED BOOKETING DIV

2012 FEB 29 PM 3:50

PUCO

DISK MAILER

HANDLE WITH

43215 @ 3793

NOTICE 443 0486 4436 07/28/12
RETURN TO SENDER
UNCLAIMED
CARRIER TO FORWARD
301 43215379300 7007 2680 0001 0486 4436 4436

This is a copy of the original document and is not a reproduction of a document delivered in the regular course of business.
Technician Art Date Processed 2/29/12