FILE

15-1-AU-RPT

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Technician _____ Date Processed MAY 20 2015

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.

Article Addressed to: 2015 MAY 20 PM 4:07

PUCO

nnacle Energy Services LLC
Bryan Erb Pres
350 Key Hwy
altimore MD 21230

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery 5-18-15

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

MAIN OFFICE MAY 18 2015

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) 7010 2780 0001 9375 4536

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

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: 2015 MAY 20 PM 4:07

PUCO

Sigecom LLC
Patrick Crocker
6045 Wedeking Ave
Evansville IN 47715

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Address

B. Received by (Printed Name) | C. Date of Delive 5/18

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 Merchandi
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7007 2680 0001 0485 7896

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1

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Article Addressed to: 2015 MAY 20 PM 4:07

PUCO

First Call Communications Inc
Patrick D Crocker Pres of NRC
4884 Dressler Rd, Ste A
Canton OH 44718

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Rita Kaster ☐ 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

2. Article Number (Transfer from service label) 7010 2780 0001 9375 4598

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

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■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to: 2015 MAY 20 PM 4:07

PUCO

Sigecom LLC
Stephanie L Jackson Tax Dir
6045 Wedeking Ave
Evansville IN 47715

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Address

B. Received by (Printed Name) | C. Date of Delive 5/19

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 Merchand
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7007 2680 0001 0485 7872

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1