

## 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:

Horizon Personal Communications Inc  
Karine Hellwig  
6391 Sprint Pkwy, #Z2000  
Overland Park, KS 66251-6100

16-1-AU-RPT

2. Article Number

(Transfer from service label)

7007 2680 0001 0486 6966

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## 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

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



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

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

The Public Utilities Commission of Ohio  
180 E. Broad Street  
Columbus, OH 43215

This is to certify that the images appearing are an  
accurate and complete reproduction of a case file  
document delivered in the Federal Court of  
16-01-AU-BPT

Technician AN Date Processed 8/26/16

## 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:

Bright Personal Communications Services, LLC  
Diane Browning  
6391 Sprint Pkwy, MS KSOPHT0101-Z2400  
Overland Park, KS 66251-2400

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

*Gib Shell*

☐ Agent☐ Addressee

B. Received by (Printed Name)

Gib Shell

C. Date of Delivery

AUG 22

D. Is delivery address different from item 1? ☐ Yes  
very address below: ☐ No☒ 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)

7014 2120 0001 2561 7090

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:

Integrity Energy LTD  
Paul Nero  
5711 Grant Ave  
Cleveland, OH 44105

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *C. Down*

- ☒
- Agent
- 
- ☐
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?  
If YES, enter delivery address below:

- ☒
- Yes
- 
- ☐
- 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 0486 6928

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:

ABA Energy Partners Inc  
Annabelen Hemelgarn  
9435 Waterstone Blvd, Ste 140  
Cincinnati, OH 45249

## 2. Article Number

(Transfer from service label)

7007 2680 0001 0486 7079

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

x

Chelupko

☐ Agent☐ Addressee

## B. Received by (Printed Name)

C. Flynn

## C. Date of Delivery

8-22-16

## 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

## 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:

Salt Fork Utility Company  
Candace Alspaugh  
1930 N Poplar St, Ste 18  
Southern Pines, NC 28387

## 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☐ S.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7014 2120 0001 2561 8066

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:

NRG Kiosk LLC  
Hamed Alibabai  
360 E South Water St, Unit 1703  
Chicago, IL 60601

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *WILSON SILVESTRE*☐ 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☐ O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7007 2680 0001 0486 6768

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:

ExteNet Systems, Inc.  
Manire, Robert  
3030 Warrenville Rd Ste 340  
Lisle, IL 60532

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

*Sally Carroy*☒ Agent☐ Addressee

B. Received by (Printed Name)

*Sally Carroy*

C. Date of Delivery

*8-23*D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7014 2120 0001 2560 8234

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:

United Telephone Company of Ohio  
Lisa Grantham  
100 CenturyLink Drive  
Monroe, LA 71203

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

x

Milan

☐ Agent☐ Addressee

B. Received by (Printed Name)

Milan

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)

7007 2680 0001 0486 6478

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:

Axiom Retail Energy, LLC  
Matthew Fair  
4203 Montrose Blvd, Ste 650  
Houston, TX 77006

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by Printed Name

C. Date of Delivery

8/23/16

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 0486 6997

**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:

Peninsula Energy Services Company, Inc  
 Al Gallo  
 331 West Central Ave , Suite 200  
 Winter Haven, FL 33880

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

B. Received by (Printed Name)

☐ Agent

☐ Addressee

C. Date of Delivery

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

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 0486 6706

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

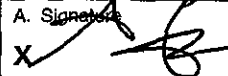
**SENDER: COMPLETE THIS SECTION**

- 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:

Better Cost Control LLC  
Steve Garson  
2274 Washington St  
Newton, MA 02462

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  ☐ Agent ☐ Addressee

B. Received by (Printed Name) Steve Garson C. Date of Delivery 8-22-16

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

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 0486 6973

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:

Unitycomm, LLC  
Fernandez, Alex  
P.O. Drawer 200  
Winter Park, FL 32790-0200

2. Article Number

(Transfer from service label)

7007 2680 0001 0486 6461

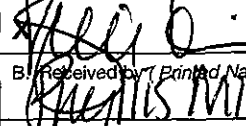
PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

☐ Agent☐ Addressee

B. Received by (Printed Name)

Alex Fernandez

C. Date of Delivery

8/23/16

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

## 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:

BT Communications Sales LLC  
Simpson, Marie  
P.O. Drawer 200  
Winter Park, FL 32790-0200

## COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☐ Agent  
x [Signature] ☐ Addressee
- B. Received by (Printed Name) PHILIP MILLER C. Date of Delivery 8/25/16
- 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 0486 8588

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15401

## SENDER: COMPLETE THIS SECTION

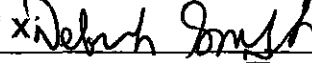
- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

MC Squared Energy Services LLC  
Bukhwele, Busilizwe  
One Monument Circle, PO Box 1595  
Indianapolis, IN 46206

## COMPLETE THIS SECTION ON DELIVERY

A. Signature



- ☐ Agent  
☐ Addressee

B. Received by (Printed Name)

Deborah Smith

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)

7007 2680 0001 0486 6812

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:

Verizon Enterprise Solutions LLC  
Sandra Anderson  
One Verizon Way, MS VC53S455  
Basking Ridge, NJ 07920

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐
- Agent
- 
- ☐
- Addressee

B. Received by (Printed Name)

V. CH. 10 DICK

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)

7007 2680 0001 0486 6430

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540