

**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:

BLACKWELL, JOHN  
804 8TH STREET  
DURRANT, IA 52747

07-286-TR-CVF

2. Article Number

(Transfer from service label)

**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

3. Service Type

☐ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

7002 2410 0000 1637 4151

UNITED STATES POSTAL SERVICE

QUAD CITIES IL P&DF

IL 512 17

29 MAY 2007 PM

First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. 3-10

RECEIVED-DOCKETING DIV

2007 MAY 31 PM 2:10

PUCO

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

PUBLIC UTILITIES COMMISSION OF OHIO  
180 E. BROAD STREET  
COLUMBUS, OHIO 43215-3793