

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:

MCCONNELL, DONALD J COUNSEL
101 PROSPECT AVE NW
1100 MIDLAND BLD
CLEVELAND, OH 44115-1075

07-170-TR-CVF
05-770-TR-CVF
08-334-TR-CVF

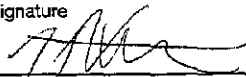
2. Article Number

(Transfer from service label)

7001 2510 0004 7177 0833

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent



Addressee

B. Received by (Printed Name)

C. Date of Delivery

4/30/08

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

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 •

RECEIVED-DOCKE FING DIV

2008 MAY -2 PM 12:29

PUCO

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

