

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

Dominion Gas/NOPEC
 Jean DeMarr
 1201 E. 55th Street, Center
 Cleveland, OH 44103

08-812-GA-CSS

2. Article Number
 (Transfer from service label)

7007 0220 0000 2272 5596

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
X Mary L Steiner

B. Received by (Printed Name) C. Date of Delivery
Mary L Steiner *7-2-03*

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

CO
 P11 2:41
 RECEIVED

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

CLEVELAND OH 441

02 JUL 2008 PM 6 T

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

• 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