

FILE

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT

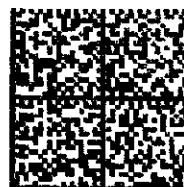
RECEIVED-DOCKETING DIV
2010 FEB 22 PM 3:12
PUCO

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
■ 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.		A. Signature X ☐ Agent ☐ Addressee	
1. Article Addressed to: DEROCCHIS, PETER 3 HESS COURT MOUNDSVILLE WV 26041-1016 (OH 32560060280) 09-520 TR-CVF		B. Received by (Printed Name) C. Date of Delivery	
2. Article Number (Transfer from service label) 7002 2410 0000 1632 3340		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	

PS Form 3811, February 2004 Domestic Return Receipt 102585-02-M-1540

CERTIFIED MAIL

The Public Utilities Commission of Ohio
180 East Broad Street
Columbus, OH 43215-3793
ADDRESS SERVICE REQUESTED



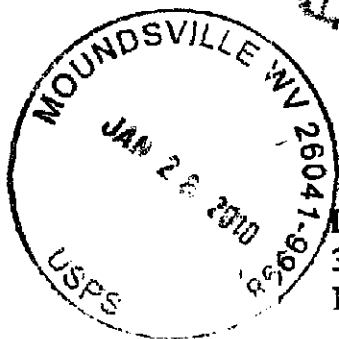
049J82020272

\$05.540

01/26/2010

Mailed From 43215
US POSTAGE

7002 2410 0000 1632 3340



DEROCCHIS, PETER
3 HESS COURT
MOUNDSVILLE WV

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152 50 1

RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD

02/20/10

26041\$1016 C008
4321503793

BC: 43215379399

*0192-03991-20-17

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Technician DR processed 2/22/2010