

FILE

RECEIVED-DOCKETING DIV

2010 AUG 31 AM 9:08

PUCO

**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:  
NELSEN, TONY J  
8678 HAMLET AVENUE  
COTTAGE GROVE OH 55016

2. Article Number  
10-601-TR-CVF  
7007 2680 0001 0486 9264  
(Transfer from service label)  
Domestic Return Receipt  
PS Form 3811, February 2004 102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

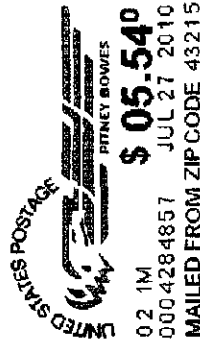
A. Signature  Agent  
 Addressee

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  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes



CERTIFIED MAIL™



Public Utilities Commission

180 East Broad Street  
Columbus Ohio, 43215-3793  
ADDRESS SERVICE REQUESTED

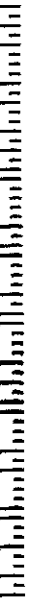
Ted Strickland, Governor  
Alan R. Schriber, Chairman

NL 7-29  
813  
823

NELSEN, TONY J  
8678 HAMLET AVENUE  
COTTAGE GROVE OH 55016

NIXIE 551 DE 1 00 08/25/10  
RETURN TO SENDER  
UNCLAIMED  
UNABLE TO FORWARD  
EC: 43215379399 \*1776-02694-23-40

550163491456998



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Technician JM Date Processed AUG 31 2010