

FILE

RECEIVED-DOCKETING DIV

2014 OCT 29 AM 11:58

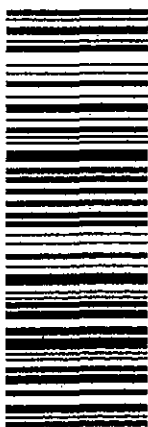
PUCO

Ohio

Public Utilities  
Commission

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

7007 2680 0001 0485 4260



FIRST CLASS

CERTIFIED MAIL

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, POLO AT DOTTED LINE

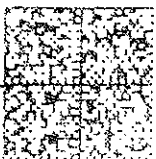
Enterprise Utility Procurement LLC  
Laura Elwell-Ham  
26910 Marian Forest  
Cypress TX 77433

NIXIE 774334039-1N

10/20/14

RETURN TO SENDER  
UNCLAIMED  
UNABLE TO FORWARD  
RETURN TO SENDER

8/30/14



\$ 006.4

2014 OCT 29 AM 11:58

PUCO

COMPLETE THIS SECTION ON DELIVERY		COMPLETE THIS SECTION	
A. Signature <input checked="" type="checkbox"/>	Agent <input type="checkbox"/> Addressee <input type="checkbox"/>	1. Article Addressed to:  Enterprise Utility Procurement LLC Laura Elwell-Ham 26910 Marian Forest Cypress TX 77433	
B. Received by (Printed Name)	C. Date of Delivery	2. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. <input type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.	
D. Is delivery address different from item 1? If YES, enter delivery address below:  <input type="checkbox"/> Yes <input type="checkbox"/> No		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Registered <input type="checkbox"/> Insured Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> G.O.D.	
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes		4. Article Number 7007 2680 0001 0485 4260 Transfer from	
Domestic Return Receipt		PS Form 3811, February 2004	

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Technician re Date Processed OCT 29 2014