

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:

Green Township-Scioto Co, Oh
 Scott Belcastro
 144 Gervais St
 Franklin Furnace, Ohio 45629

16-1-AU-RPT

2. Article Number

(Transfer from service label)

7014 2120 0001 2561 8097

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

[Handwritten Signature]

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

8-22-16

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

3. Service Type

- Certified Mail
- Registered
- Insured Mail
- Express Mail
- Return Receipt for Merchandise
- C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

AUG 22 PM 5:29
 SCIO
 D-DOCKET
 16

UNITED STATES POSTAL SERVICE

OH 430

20 AUG '16



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

- Sender: Please print your name, address, and ZIP+4 in this box •

The Public Utilities Commission of Ohio
 180 E. Broad Street
 Columbus, OH 43215

This is to certify that the images appearing are an
 accurate and complete reproduction of a case file
 document delivered in the regular course of business.

Technician Arif Date Processed 8/24/16



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1. Article Addressed to:

Pleasant Township, Oh
 Scott Belcasto
 5373 Norton Rd
 Grove City, Ohio 43123

16-1-AU-RPT

2. Article Number

(Transfer from service label)

7007 2680 0001 0486 6676

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X 

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

5/20/16

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

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1. Article Addressed to:

Village of Yorkville
 Ney, John
 9604 Cliffview Street NW
 Clinton, OH 44216

2. Article Number

(Transfer from service label)

7007 2680 0001 0486 6294

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

[Handwritten Signature]
[Handwritten Name: John Ney]

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

8/20/16

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

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1. Article Addressed to:

Village of Tiltonsville
 Ney, John
 9604 Cliffview Street NW
 Clinton, OH 44216

2. Article Number
 (Transfer from service label)

7007 2680 0001 0486 6317

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 x *John Ney* Addressee

B. Received by (Printed Name) *John Ney* C. Date of Delivery *8/20/16*

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

SENDER: COMPLETE THIS SECTION

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1. Article Addressed to:

Village of Mingo Junction
 Ney, John
 9604 Cliffview Street NW
 Clinton, OH 44216

2. Article Number
 (transfer from service label)

7007 2680 0001 0486 6362

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 X *John Ney*

B. Received by (Printed Name) Date of Delivery
John Ney *8/20/16*

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

SENDER: COMPLETE THIS SECTION

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1. Article Addressed to:

Village of Rayland
 Ney, John
 9604 Cliffview Street NW
 Clinton, OH 44216

2. Article Number

(transfer from service)

7007 2680 0001 0486 6355

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

[Handwritten Signature]
[Handwritten Name: John Ney]

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

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1. Article Addressed to:

Village of Minerva
 Ney, John
 9604 Cliffview Street NW
 Clinton, OH 44216

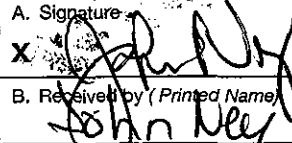
2. Article Number

(Transfer from service label)

7007 2680 0001 0486 6379

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x 

- Agent
- Addressee

B. Received by (Printed Name)

John Ney

C. Date of Delivery

8/28/16

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

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1. Article Addressed to:

Guidance Telecom LLC
 McGinness, Mark
 30628 Detroit Rd #105
 Westlake, OH 44145

2. Article Number

(Transfer from service label)

7014 2120 0001 2561 8080

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *K. Klugza*

Agent

Addressee

B. Received by (Printed Name)

K. KHWATA

C. Date of Delivery

8/20

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.

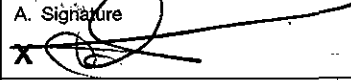
4. Restricted Delivery? (Extra Fee)

Yes

SENDER: COMPLETE THIS SECTION

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- Print your name and address on the reverse so that we can return the card to you.
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COMPLETE THIS SECTION ON DELIVERY

A. Signature  Agent
 Addressee

B. Received by (Printed Name) Cameron Sheppard C. Date of Delivery 8/20/16

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

1. Article Addressed to:

Western Reserve Energy Services LLC
 Wiegner, Ryan
 3867 W Market St, Suite 268
 Akron, OH 44333

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number

(Transfer from service label)

7007 2680 0001 0486 6287

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.

1. Article Addressed to:

Frazier Ltd
Kathleen Frazier
PO Box 4291
Akron, OH 44321

A. Signature
Kathleen Frazier Agent Addressee

B. Received by (Printed Name) *KATHLEEN FRAZIER* C. Date of Delivery *2-20-16*

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Transfer from service label) **7007 2680 0001 0486 1008**

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:

Village of Carrollton
 Ney, John
 9604 Cliffview Street NW
 Clinton, OH 44216

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
 John Ney 8/20/16

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

2. Article Number
 (Transfer from service label)

7007 2680 0001 0486 6416

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:

Village of Stratton
 John Ney
 9604 Cliffview St NW
 Clinton, OH 44216

2. Article Number
(Transfer from service label)

7007 2680 0001 0486 6324

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
 John Ney 8/20/16

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

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.

1. Article Addressed to:

Village of Dillonvale
John
9604 Cliffview St NW
Clinton, OH 44216

A. Signature
X *John Kelly* Agent Addressee

B. Received by (Printed Name) *John Kelly* C. Date of Delivery *8/20/16*

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
(Transfer from service label) **7007 2680 0001 0486 6393**

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.

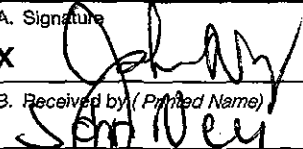
1. Article Addressed to:

Village of Scio
 Ney, John
 9604 Cliffview Street NW
 Clinton, OH 44216

2. Article Number
 (Transfer from service label)

7007 2680 0001 0486 6331

COMPLETE THIS SECTION ON DELIVERY

A. Signature X  Agent
 Addressee

B. Received by (Printed Name) John Ney C. Date of Delivery 8/20/16

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