

SIGNATURE PAGE

Please sign below if you would like to join in the Settlement Petitions signed by the First Energy Companies (Met-Ed, Penelec, Penn Power and West Penn Power), the parties listed above. Please circle the docket number of the utility who filed the proposed rate increase about which you filed a complaint:

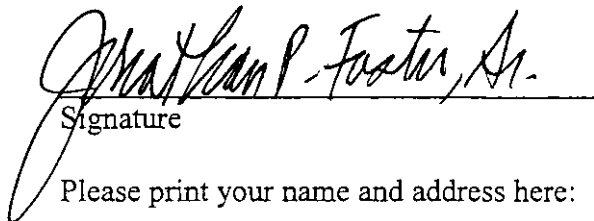
Metropolitan Edison Company, R-2016-2537349

Pennsylvania Electric Company, R-2016-2537352

Pennsylvania Power Company, R-2016-2537355

West Penn Power Company, R-2016-2537359

I have read the Settlement Petition and wish to join in it. I am willing to withdraw my Complaint in this case if the Pennsylvania Public Utility Commission approves the Settlement Petition without modification.


Signature

Please print your name and address here:

10-27-2016
Date

South Waverly Borough Solicitor
Jonathan P. Foster, Sr.
303 South Keystone Avenue
Sayce, PA 15840

RECEIVED

OCT 27 2016

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

PRESS FIRMLY TO SEAL



1007



17105

U.S. POSTAGE
PAID
SAYRE, PA
18840
OCT 27, 18
AMOUNT

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**UNITED STATES
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**PRIORITY
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CUSTOMER USE ONLY

FROM: (PLEASE PRINT)

PHONE ()

Foster Law Office
353 South Keokuk Avenue
Sayre, PA 18840

PAYMENT BY ACCOUNT (if applicable)

DELIVERY OPTIONS (Customer Use Only)

☐ **SIGNATURE REQUIRED** *Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.*

Delivery Options

- ☐ No Saturday Delivery (delivered next business day)
 - ☐ Sunday/Holiday Delivery Required (additional fee, where available*)
 - ☐ 10:30 AM Delivery Required (additional fee, where available*)
- *Refer to USPS.com® or local Post Office™ for availability.

TO: (PLEASE PRINT)

PHONE ()

Secretary for the Commission
Kerryann Conover
P.O. Box 3265
Harrisburg, PA 17105-3265

ZIP + 4® (U.S. ADDRESSES ONLY)

17105

ORIGIN (POSTAL SERVICE USE ONLY)

<input type="checkbox"/> 1-Day		<input type="checkbox"/> 2-Day		<input type="checkbox"/> Military		<input type="checkbox"/> DPO	
PO ZIP Code 18840		Scheduled Delivery Date (MM/DD/YY) 10/28		Postage \$ 22.95			
Date Accepted (MM/DD/YY) 10/27		Scheduled Delivery Time <input type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM <input checked="" type="checkbox"/> 12 NOON		Insurance Fee \$ -		COD Fee \$ -	
Time Accepted 11:41 AM		10:30 AM Delivery Fee <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM \$ -		Return Receipt Fee \$ -		Live Animal Transportation Fee \$ -	
Weight 7 lbs. 7 ozs.		Sunday/Holiday Premium Fee \$ -		Total Postage & Fees \$ 33.45			
Flat Rate <input type="checkbox"/>		Acceptance Employee Initials					

DELIVERY (POSTAL SERVICE USE ONLY)

Delivery Attempt (MM/DD/YY)	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Delivery Attempt (MM/DD/YY)	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature

LABEL 11-B, SEPTEMBER 2015

PSN 7690-02-000-9996

3-ADDRESSEE COPY

WRITE FIRMLY WITH BALL POINT PEN ON HARD SURFACE TO MAKE ALL COPIES LEGIBLE.

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