



COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
P.O. BOX 3265, HARRISBURG, PA 17105-3265

April 27, 1992

K. H. R.

IN REPLY PLEASE
REFER TO OUR FILE

A-00107365
Folder 1, Am-A

J BRUCE WALTER ESQUIRE
RHOADS & SINON
PO BOX 1146
HARRISBURG PA 17108

Application of H. Fred Barefoot Trucking, Inc.

To Whom It May Concern:

Please be advised that the tariff requirement has been satisfied
in the above entitled proceeding and you may now utilize those rights.

Very truly yours,

John G. Alford
Secretary

**DOCUMENT
FOLDER**

EMD /jz
cc:applicant
Box 25
Alum Bank, PA 15521

DOCKETED
APR 28 1992

**DOCUMENT
FOLDER**

DOCKETED
APR 28 1992

SENDER:

- Complete items 1 and 2 for additional services.
- Complete items 3, and 4.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt Fee will provide you the signature of the person delivered to and the date of delivery.

I also wish to receive the following services (for an extra fee):

- 1. Addressee's Address
- 2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to: *A-107365*
Sec. 2. F.1-Am-A

4a. Article Number **044073**

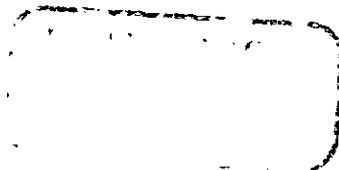
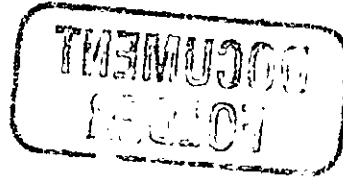
- 4b. Service Type
- Registered Insured
 - Certified COD
 - Express Mail Return Receipt for Merchandise

J. Bruce Walter, Esq
7. Signature (Addressee)

7. Date of Delivery **APR 26 1992**

6. Signature (Agent) *Harold Slooff*

8. Addressee's Address (Only if requested and fee is paid)



0889A