

ROSEMARY Chiavetta, SECRETARY
PENNSYLVANIA PUBLIC UTILITY COMMISSION

July 17th 2017

RE: CATHERINE LAMAGNA
DOCKET NO. C-2017-2608014

I NEED AT LEAST A 30 BUSINESS DAY EXTENSION
TO ANSWER THE PRELIMINARY OBJECTION BECAUSE
I RECEIVED THIS NOTICE 10 DAYS AFTER IT WAS
SERVICED. I ALSO NEED THIS TIME TO SEEK LEGAL
ADVICE.

Thank-you
Catherine La Magna

RECEIVED

JUL 17 2017

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

CATHERINE LAMAGNA
616 MAIN STREET/P.O. BOX 143
Thompson, PA 18465-0143

ROSEMARY Chiavetta, Secretary
Pennsylvania Public Utility Commission
Commonwealth Keystone Building
P.O. BOX 3265
HARRISBURG, PA 17105-3265

PRESS



UNITED STATES POSTAGE
 PITNEY BOWES
 02 1P \$023.750
 0003919787 JUL 17 2017
 MAILED FROM ZIP CODE 18465



EL585248580US

ATIONAL USE



PRIORITY
* MAIL *
EXPRESS™

CUSTOMER USE ONLY

FROM: (PLEASE PRINT) PHONE ()

CATHERINE LAMAGNA
 616 MAIN STREET/PO BOX 143
 HARRISBURG, PA 18465-0143

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 ()

ROSEMARY LINDVATA, SECRETARY
 PENNSYLVANIA PUBLIC UTILITY COMMISSION
 COMMUNAL HEALTH KEYSTONE BUILDING
 P.O. BOX 3265
 HARRISBURG, PA 17105-3265
 ZIP + 4 (U.S. ADDRESSES ONLY)
 17105

■ For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.
 ■ \$100.00 insurance included.

ORIGIN (POSTAL SERVICE USE ONLY)

1-Day 2-Day Military DPO

PO ZIP Code 18465	Scheduled Delivery Date (MM/DD/YY) 7/18/17	Postage \$ 23.75	
Date Accepted (MM/DD/YY) 7/17/17	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 16:23 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	10:30 AM Delivery Fee \$	Return Receipt Fee \$	Live Animal Transportation Fee \$
Weight lb. oz.	Flat Rate \$	Sunday/Holiday Premium Fee \$	Total Postage & Fees \$ 23.75
Acceptance Employee Initials G			

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 7690-02-000-9998 3-ADDRESSEE COPY

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

TM
U.S.