

1007

\$24.70
R2305K141725-02

BIE VS. VISIT VANS LLC

**PRIORITY
★ MAIL ★**

C-2017-2575222 \$2,000
C-2017-2622896 \$500

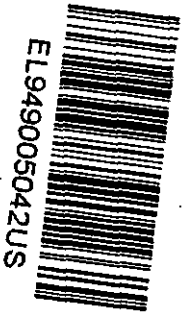


EL949005042US

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EL949005042US

Agency: PUC
Floor:
External Carrier: EXPRESS

To: PUC



CUSTOMER USE ONLY
FROM: (PLEASE PRINT) VISIT VANS LLC
PHONE: (414) 955-1200 Money order

1101 Howard/Har St
St 100
Allentown PA 18101

PAID 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) Kramley border
PUC
3265
Harrisburg PA
PHONE ()

ZIP + 4* (U.S. ADDRESSES ONLY)
17105-3205

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

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 18032	Scheduled Delivery Date (MM/DD/YYYY) 3/3/18	Postage \$ 24.70	
Date Accepted (MM/DD/YYYY) 3/2/18	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 11:53 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	10:30 AM Delivery Fee \$	Return Receipt Fee \$	Live Animal Transportation Fee \$
Special Handling/Fragile \$	Sunday/Holiday Premium Fee \$	Total Postage & Fees \$ 24.70	
Weight 7 lbs. 0 oz.	Acceptance/Employee Initials CB		

DELIVERY (POSTAL SERVICE USE ONLY)

Delivery Attempt (MM/DD/YYYY) Time 3-3-18 2:45	Employee Signature JLW
Delivery Attempt (MM/DD/YYYY) Time 	Employee Signature

LABEL 11-B, OCTOBER 2018 PSN 7690-02-000-9996 3-ADDRESSEE COPY

3/5/2018 9:53:28 AM

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

MAR 09 2018

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WRITE FIRMLY WITH

EP13F July 2013 OD: 12.5 x 9.5



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