

C-2018-3004440
 Fine payment
 Money Order
 #600255020

RECEIVED

MAY 23 2019

PA PUBLIC UTILITY COMMISSION
 SECRETARY'S BUREAU

PRESS FIRMLY TO SEAL



1007



17120

U.S. POSTAGE PAID
 PM 1-Day
 UNION CITY, PA
 16438
 MAY 23, 19
 AMOUNT

\$25.50

R2305M143384-20



EK403249005US

CUSTOMER USE ONLY

FROM: (PLEASE PRINT) PHONE () 814-572-0855

JOHN A. FIELDING
 35932 MAIN ST
 CENTERVILLE PA 16404

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 ()

PA PUC ATT SECRETARY
 BUREAU
 400 NORTH ST
 HARRISBURG PA
 ZIP + 4 (U.S. ADDRESSES ONLY)

17120-

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

INTERNATIONAL USE



PRIORITY
 * MAIL *
 EXPRESS™

ORIGIN (POSTAL SERVICE USE ONLY)

<input checked="" type="checkbox"/> 1-Day	<input type="checkbox"/> 2-Day	<input type="checkbox"/> Military	<input type="checkbox"/> DPO
PO ZIP Code 16438	Scheduled Delivery Date (MM/DD/YY) 05/24/19	Postage \$ 25.50	
Date Accepted (MM/DD/YY) 05/23/19	Scheduled Delivery Time <input type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM <input type="checkbox"/> 12 NOON	Insurance Fee \$	COD Fee \$
Time Accepted 2:02	10:30 AM Delivery Fee <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Return Receipt Fee \$	Live Animal Transportation Fee \$
Weight lbs. ozs.	Sunday/Holiday Premium Fee \$	Total Postage & Fees \$ 25.50	
Acceptance Employee Initials IB			

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