

EXTRAORDINARY URGENT Please Rush to Addressee

home or office at usps.com/pic/

C-2019-3008796 BIE v.

Print postage online - Go to usps

PLEASE PRESS FIRMLY

ANJ Transportation LLC



1007



17120

PME 1-Day SECANE, PA 19018 DEC 26, 19 AMOUNT

\$25.50

R2305K141585-09

\$600.00 Cashier's Check



UNITED STATES POSTAL SERVICE

Flat Rate Mailing Envelope

For Domestic and International Use

Visit us at usps.com



When used internationally affix customs declarations (PS Form 2976, or 2976A).



EK612381634US

WRITE FIRMLY TO MAKE ALL COPIES LEGIBLE.

CUSTOMER USE ONLY

FROM: (PLEASE PRINT) PHONE ( )

Antoine Sanders  
640 South Ave Apt. I-8  
Secane Pa. 19018

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 Public Utility Commission  
400 North St.  
Harrisburg Pa 17120

ZIP + 4 (U.S. ADDRESSES ONLY)



PRIORITY MAIL EXPRESS™

ORIGIN (POSTAL SERVICE USE ONLY)

1-Day  2-Day  Military  DPO

PO ZIP Code	Scheduled Delivery Date (MM/DD/YY)	Postage
19018	12 27 19	\$ 25.50
Date Accepted (MM/DD/YY)	Scheduled Delivery Time	Insurance Fee
12 26 19	<input type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM <input checked="" type="checkbox"/> 12 NOON	\$
Time Accepted	10:30 AM Delivery Fee	Return Receipt Fee
14/ <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	\$	\$
Weight	Sunday/Holiday Premium Fee	Total Postage & Fees
1.4 lbs. <input type="checkbox"/> Flat Rate <input checked="" type="checkbox"/> ozs.	\$	\$ 25.50
Acceptance Employee Initials		
ASW		

DELIVERY (POSTAL SERVICE USE ONLY)

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

RECEIVED

DEC 30 2019

PA PUBLIC UTILITY COMMISSION SECRETARY'S BUREAU

CMPC

To: PUC MASTER

Agency: PUC

Floor:

External Carrier: EXPRESS

12/27/2019 9:58:00 AM



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LABEL 11-B, JANUARY 2014

PSN 7690-02-000-9996

3-ADDRESSEE COPY

EP13F