



PRESS FIRMLY TO SEAL



17120

FOGELSVILLE, PA 18051
MAY 29, 2024

\$30.45

R2304E104860-2

RDC 07



**PRIORITY
MAIL
EXPRESS®**



EJ 618 991 815 US

CUSTOMER USE ONLY

FROM: (PLEASE PRINT)

PHONE (215) 816-7079

9 Witman Dr.
Breinigsville, Pa 18031

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 ()

Secretary
Pennsylvania Utility Commission
Commonwealth Keystone Building
1106 North St. 2nd floor
Harrisburg, Pa 17120

ZIP + 4® (U.S. ADDRESSES ONLY)

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

PAYMENT BY ACCOUNT (if applicable)

USPS® Corporate Acct. No.

Federal Agency Acct. No. or Postal Service™ Acct. No.

ORIGIN (POSTAL SERVICE USE ONLY)

- 1-Day
- 2-Day
- Military
- DPO

PO ZIP Code 18051	Scheduled Delivery Date (MM/DD/YY) 5/31/24	Postage \$ 30.45
Date Accepted (MM/DD/YY) 5/29/24	Scheduled Delivery Time <input type="checkbox"/> 10:00 AM <input checked="" type="checkbox"/> 3:00 PM <input type="checkbox"/> 12:00 PM	Insured Fee \$
Time Accepted 5:00 PM	10:30 AM Delivery Fee \$	Return Receipt Fee \$
Special Handling/Fragile \$	Sunday/Holiday Premium Fee \$	Live Animal Transportation Fee \$
Weight lbs. ozs.	Acceptance Employee Initials [Signature]	Total Postage & Fees \$ 30.45

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	MAY 30 2024

RECEIVED

DO NOT REMOVE FROM THIS CORNER

LABEL 11-B, MARCH 2019

PSN 7690-02-000-9026

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU