

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Susan M. Beale  
Resident Agent  
The Detroit Edison Co  
2000 Second Avenue  
Detroit, MI 48226

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) <u>J. Fileccia</u>	B. Date of Delivery <u>10-23-06</u>
C. Signature <u>[Signature]</u>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee
D. Is delivery address different from item 1? <input type="checkbox"/> Yes if YES, enter delivery address below: <input type="checkbox"/> No	

3. Service Type  
 Certified Mail     Express Mail  
 Registered     Return Receipt for Merchandise  
 Insured Mail     C.O.D.

4. Restricted Delivery? (Extra Fee)     Yes

2. Article Number (Transfer from service label)    7001 0320 0005 8918 8976

**U.S. Postal Service**  
**CERTIFIED MAIL RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

7001 0320 0005 8918 8976

CECLA-05-2007-0002  
EPLCA-05-2007-0001

Postage	\$ 2.03
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.89
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 6.32</b>

Se Susan M. Beale  
 St Resident Agent  
 Ci The Detroit Edison Co  
 2000 Second Avenue  
 Detroit, MI 48226

CHICAGO IL LOOP STA  
 OCT 20 2006

PS or Instructions