

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:

Charles J. Nicol
 Northeast Utilities Service Company
 P.O. Box 270
 Hartford, CT 06141-0270
 Docket No. TSCA-01-2010-0021

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 X *Paul McSperrin* Addressee

B. Received by (Printed Name) SEP C. Date of Delivery
 16 2010

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: 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)

7010 0290 0000 5810 8755

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540