

RECEIVED-FPSC

2016 JAN 21 AM 8:21

COMMISSION
CLERK

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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. 	<p>A. Signature <input checked="" type="checkbox"/> <i>Dave Clark</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to: <i>DHS-15071-EI and 16001-EI</i></p> <p>DNs: 01115-14, 01534-14, 01945-14, 02587-14, 03374-14, 04104-14, 04382-14, 04914-14, 05511-14, 06090-14, 06474-14, 06908-14, 00549-15, 04320-15, 04462-15 and 04740-15</p> <p>Dianne M. Triplett Duke Energy Florida, LLC 299 First Avenue North St. Petersburg FL 33701</p>	<p>B. Received by (Printed Name) <i>Dave Clark</i></p>	<p>C. Date of Delivery</p>
<p>2. Article Number (Transfer from service label)</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>PS Form 3811, February 2004</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>7011 3500 0001 5977 7991</p>		
<p>Domestic Return Receipt</p>		
<p>102595-02-M-1540</p>		