

RECEIVED-FPSC

11 OCT 13 AM 9:00

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. 	A. Signature <input checked="" type="checkbox"/> <i>Lisa Stright</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
Progress Energy Florida, Inc. Paul Lewis, Jr., Manager, Regulatory Affairs 106 East College Avenue, Suite 800 Tallahassee, Florida 32301-7740	B. Received by (Printed Name) <i>Lisa Stright</i>	C. Date of Delivery
110286-E1 Complaint,mas	<input type="checkbox"/> Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label)	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.	
	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
	7009 3410 0002 4112 7331	

DOCUMENT NUMBER-DATE

07516 OCT 13 =

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