

RECEIVED-FPSC

11 DEC 19 PM 12:49

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 type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>X <i>Dana Clark</i></p>	
<p>1. Article Addressed to: <i>110090-EQ</i> <i>DNS 02131-11 and 02897-11</i></p> <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <p>JOHN T BURNETT ESQUIRE PROGRESS ENERGY 299 1st AVE N ST PETERSBURG FL 33701-3308</p> </div>	<p>B. Received by (<i>Printed Name</i>)</p> <p><i>Dana Clark</i></p>	<p>C. Date of Delivery</p> <p><i>12/17/11</i></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>2. Article Number (Transfer from service label)</p>	<p>7009 3410 0002 4112 6969</p>	
<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (<i>Extra Fee</i>) <input type="checkbox"/> Yes</p>		
<p>PS Form 3811, February 2004</p>	<p>Domestic Return Receipt</p>	<p>102595-02-M-1540</p>

DOCUMENT NUMBER: DATA
09039 DEC 19 =
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