

RECEIVED-FPSC

12 JUN 22 AM 8: 01

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 type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <i>X K Cochran</i>	
1. Article Addressed to:	B. Received by (Printed Name) <i>K COCHRAN</i>	C. Date of Delivery <i>6-21-12</i>
Progress Energy Florida, Inc. Paul Lewis, Jr., Manager, Regulatory Affairs 106 East College Avenue, Suite 800 Tallahassee, Florida 32301-7740	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
<i>120176-E1 complaint.mos</i>	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.	
2. Article Number (Transfer from service label)	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS Form 3811, February 2004	7009 3410 0002 4113 1000	102595-02-M-1540

DOCUMENT NUMBER-DATE

04120 JUN 22 04

FPSC-COMMISSION CLERK