

110305-EI

SEPTEMBER 6, 2012 A COMPLAINT FLORIDA PUBLIC SERVICE COMMISSION

COMPANY: TAMPA ELECTRIC CO. 9/21/12

CUSTOMER: EDWARD MCDONALD
7203 N. 41st St.
Tampa, FL 33604-2 (813) 374-3837
PLEASE ASSIGN A COMPLAINT NUMBER TO THE ATTACHED
THIS COMPLAINT WAS RECEIVED BY FPSC 11 days ago

RE: Improper transfer of deposit funds & Statute of Limitations (\$307.49)

1. Please provide a COMPLAINT NUMBER for the issues raised in the BILLING and FPSC COMPLIANCE issues raised in the attached complaint(4 pgs)

2. The BILLING and COMPLIANCE issues raised herein have NEVER BEEN PRESENTED TO - OR RULED UPON BY THE COMMISSION.

PURSUANT TO THE FAIR CREDIT REPORTING ACT AND THE FAIR DEBT COLLECTION PRACTICES ACT' TECO IS ASKED TO PRODUCE THE FOLLOWING: Billing for 7203 N. 40th St. for August and September 2007/ Acct' # 0261023156(2)(3) (i.e.) "investigation" charges transferred from 4010 Pocahontas Ave..

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:
Office of Clerk
FPSC
2540 Shumard oak Blvd
Tallahassee, FL 32399
Re: complaint dated 9-6-12

COMPLETE THIS SECTION ON DELIVERY

A. Signature  Agent Addressee

B. Received by (Printed Name) Michael Staden C. Date of Delivery 9-11-12

D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

Edward McDonald
9-6-12

RECEIVED-FPSC
12 SEP 27 AM 9:02
COMMISSION CLERK

2. Article Number (Transfer from service label) 7011 2970 0000 2003 5944

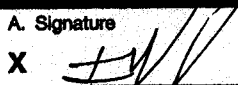
PS Form 3811, February 2004 Domestic Return Receipt 102995-02-M-1540

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:
TECO
P.O. Box 3/318
Tampa, FL 33631-3318

COMPLETE THIS SECTION ON DELIVERY

A. Signature  Agent Addressee

B. Received by (Printed Name) C. Date of Delivery Aug 25 2012

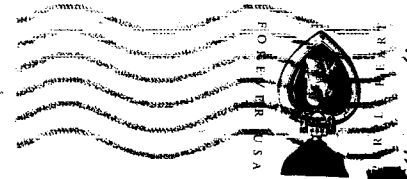
D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise

RECEIVED-FPSC
SEP 27 9 05 50
COMMISSION CLERK

EDWARD MCDONALD
7203 N 41ST ST
TAMPA FL 33604-2425

TAMPA FL 335
SAINT PETERSBURG FL
24 SEP 2012 PM 5 L



OFFICE OF THE CLERK
FPSC

2540 Schumard Oak Blvd.

Tallahassee, FL 32399

32399085099



A COMPLAINT