

RECEIVED-FPSC

12 NOV 21 AM 8:53

COMMISSION
CLERK

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
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. 4 Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
	B. Received by (Printed Name)	C. Date of Delivery
1. Article Addressed to: 120000-OT; 02754-12	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
JOHN T BURNETT ESQUIRE PROGRESS ENERGY SERVICE CO 299 1 ST AVE N ST PETERSBURG FL 33701-3308	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.	
	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
Article Number (Transfer from service label)	7009 3410 0002 4113 1253	
Form 3811, February 2004	Domestic Return Receipt	102595-02-M-1540

DOCUMENT NUMBER-DATE

07779 NOV 21 04

FPSC-COMMISSION CLERK