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. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature Agent Addressed
1. Article Addressed to: ISOCOI-ET NOISIS-IS MATTHEW BERNIER SENIOR COUNTY	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
DUKE ENERGY FLORIDA INC 299 1 ST AVE N ST. PETERSBURG FL 33701-3308	Service Type Certified Mail
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7011 3	3500 0001 5977 7021
PS Form 3811, February 2004 Domestic Re	eturn Receipt 102595-02-M-1540

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