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<ul style="list-style-type: none"><li>■ Complete items 1, 2, and 3.</li><li>■ Print your name and address on the reverse so that we can return the card to you.</li><li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li></ul>	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>
<p>1. Article Addressed to:</p> <p>Dkt 20150001-EI, 20150171-EI, 20200001-EI DNs 05290-2015, 06302-2015, 08952-2015 04107-2020, 11665-2020</p> <p>MR. MATTHEW R. BERNIER DUKE ENERGY OF FLORIDA 106 E. COLLEGE AVE., STE. 108 TALLAHASSEE, FL 32301</p>  <p>9590 9402 6460 0346 1558 75</p>	<p>B. Received by (Printed Name) C. Date of Delivery</p> <p><i>[Signature]</i> 8/22</p>
<p>2. Article Number (Transfer from service label)</p> <p>7020 2450 0001 8211 4869</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>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	<p>3. Service Type <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p> <p>Domestic Return Receipt</p>