

110236-EI

RECEIVED-FPSC

11 AUG -1 AM 9:19

COMMISSION
CLERK

<p>COMPLETE THE FOLLOWING</p> <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. 		<p>EXEMPT FROM POSTAGE AND PAYMENT</p>	
<p>1. Article Addressed to:</p> <p>Florida Power & Light Company Ken Hoffman, Vice President, Regulatory Affairs 215 South Monroe Street, Suite 810 Tallahassee, Florida 32301-1858</p>		<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p><i>[Signature]</i></p>	
		<p>B. Received by (Printed Name)</p> <p><i>V Floyd</i></p>	<p>C. Date of Delivery</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>Service Type</p> <p><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.</p>	
<p><i>110236-E1 Complaint.mas</i></p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>2. Article Number (Transfer from service label)</p>		<p>7009 3410 0002 4112 6518</p>	
<p>PS Form 3811, February 2004</p>		<p>Domestic Return Receipt</p>	<p>102595-02-M-1840</p>

DOCUMENT NUMBER-DATE

05337 AUG-1 =

FPSC-COMMISSION CLERK