

RECEIVED-FPSC

12 MAR 20 AM 11:45

COMMISSION
CLERK

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<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. 	A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee <i>X IC Cochran</i>	
1. Article Addressed to:	B. Received by (Printed Name) <i>IC COCHRAN</i>	C. Date of Delivery
Progress Energy Florida, Inc. Paul Lewis, Jr., Manager, Regulatory Affairs 106 East College Avenue, Suite 800 Tallahassee, Florida 32301-7740	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
<i>120057-B1 Complaint, mas</i> 2. Article Number (Transfer from service label)	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.	
PS Form 3811, February 2004	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	7009 3410 0002 4112 8086 Domestic Return Receipt

DOCUMENT NUMBER-DATE

01664 MAR 20 04

FPSC-COMMISSION CLERK