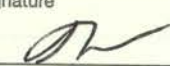


RECEIVED- FPSC

15 APR 23 AM 9: 23

COMMISSION  
CLERK

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"><li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</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>		A. Signature <b>X</b>  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: <b>IS0001-EI</b> <b>DNS 00181-14. 00566-14;</b> <b>01020-14</b>		B. Received by (Printed Name) <b>Tom Brown</b>	C. Date of Delivery
DIANNE M TRIPLETT ASSOCIATE GENERAL COUNSEL DUKE ENERGY FLORIDA INC 299 1 <sup>ST</sup> AVE N ST. PETERSBURG FL 33701		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label)		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.	
7011 3500 0001 5977 7038		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS Form 3811, February 2004		Domestic Return Receipt 102595-02-M-1540	