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COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION ■ Complete items 1, 2, and 3. Also complete ☐ Agent item 4 if Restricted Delivery is desired. ☐ Addressee Print your name and address on the reverse C. Date of Delivery 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. 1. Article Addressed to: (DN 03986-14) 150007-EI (DN 03986-14) 140 113-EI (05198-14:05658-14 If YES, enter delivery address below: MATTHEW BERNIER SENIOR COUNSEL DUKE ENERGY FLORIDA INC 3. Service Type Certified Mail 299 1ST AVE N ☐ Express Mail ☐ Return Receipt for Merchandise ST. PETERSBURG FL 33701-3308 ☐ Registered ☐ C.O.D. ☐ Insured Mail 4. Restricted Delivery? (Extra Fee) ☐ Yes 2. Article Number 7011 3500 0001 5977 6925 (Transfer from service label) 102595-02-M-1540 Domestic Return Receipt PS Form 3811, February 2004

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