

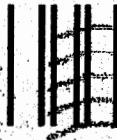
41-08165-08

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. 	<p>A. Signature <input checked="" type="checkbox"/> <i>Stacy Byrnes</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Stacy Byrnes</i> C. Date of Delivery</p>
<p>1. Article Addressed to:</p> <p>J.W. Shea Vice President, Nuclear Licensing Tennessee Valley Authority LP 3D-C 1101 Market Street Chattanooga, TN 37402-2801</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>3. Service Type <input 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>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p>	<p>7003 1680 0004 9103 7472</p>

PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-1540

UNITED STATES POSTAL SERVICE

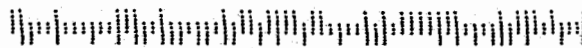
CHATTANOOGA, TN 37431
07 APR 2017 PM



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

U.S. Nuclear Regulatory Commission
Suite 100
Attn: Lyn Walt. DNMS
2100 Renaissance Blvd.
King of Prussia, PA 19406-2745



REC'D IN LAT 4-24-17

592694
NMSS/RGN1 MATERIALS-002