

7002 2030 0004 5245 6693

**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

|   |    |                  |
|---|----|------------------|
| Postage   | \$ | Postmark<br>Here |
| Certified Fee                                     |    |                  |
| Return Receipt Fee<br>(Endorsement Required)      |    |                  |
| Restricted Delivery Fee<br>(Endorsement Required) |    |                  |
| Total Postage & Fees                              | \$ |                  |

CT03-136-138

Sent To  
 Les Sumption, Lt & Comm.  
 Street, Apt. No.,  
 or PO Box No. 125 Railroad Ave SE  
 City, State Aberdeen SD 57401

PS Form 3800, June 2002 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- 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.

1. Article Addressed to:  
 Mr Les Sumption  
 Lt & Comm.  
 125 Railroad Ave SE  
 Aberdeen, SD  
 57401

2. Article Number  
 (Transfer from service label)

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee

B. Received by (Printed Name) C. Date of Delivery  
 Mr Sumption

D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No

3. Service Type CT03-136-138  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  P.O.D.

4. Restricted Delivery  Extra Fee  Yes

