

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$

RECEIVED

Certified Fee

JUN 29 2012
 Mark Here

Return Receipt Fee
 (Endorsement Required)

Restricted Delivery Fee
 (Endorsement Required)

**SOUTH DAKOTA PUBLIC
 UTILITIES COMMISSION**

Total Postage & Fees \$

Sent To

Jeff Bush

PS Form 3800, August 2006

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:

Jeff Bush
 18467 282nd Ave
 Pierre SD 57501

2. Article Number
 (Transfer from service label)

7007 0710 0000 8015 2516

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Michelle A Bush*

Agent

Addressee

B. Received by (Printed Name)

Michelle A Bush

C. Date of Delivery

7-3-12

D. Is delivery from item 1? Yes

If YES, enter delivery address below: No

RECEIVED
 JUL 05 2012

**SOUTH DAKOTA
 UTILITIES COMMISSION**

3. Service Type

Certified Mail Express Mail

Registered Return Receipt for Merchandise

Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes