

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:

JACK AND CINDY BRUNSON
11122 FORT IGLOO ROAD
EDGEMONT SD 57735

 2. Article Number
(Transfer from service label)

7007 0710 0000 8015 0109

COMPLETE THIS SECTION ON DELIVERY

A. Signature

 X *Polene D. Lakota*
 Agent Addressee

B. Received by (Printed Name)

Polene D. Lakota

C. Date of Delivery

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

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

 Yes

UNITED STATES POSTAL SERVICE



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

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

PUBLIC UTILITIES COMMISSION
500 E CAPITOL
PIERRE SD 57501

GT 07006

