

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

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

OFFICIAL USE

Postage \$
 Certified Fee
 Return Receipt Fee
 (Endorsement Required)
 Restricted Delivery Fee
 (Endorsement Required)
 Total Postage & Fees \$

RECEIVED
 JUN 29 2012
 SOUTH DAKOTA PUBLIC
 UTILITIES COMMISSION

Sent To
 Street or P.O. Box
 City
 Jeff Brown

PS Form 3800, August 2006 See Reverse for Instructions

7007 0710 0000 8015 2523

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 Brown
 9008 133 Ave SW
 Scranton ND 58653

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 x Lynn G. Brown Agent
 Addressee

B. Received by (Printed Name)
 Lynn G. Brown

C. Date of Delivery
 7-5-12

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

RECEIVED
 JUL 09 2012
 SOUTH DAKOTA PUBLIC
 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

2. Article Number (Transfer from service) 7007 0710 0000 8015 2523