

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
 Filed

**SOUTH DAKOTA PUBLIC
 UTILITIES COMMISSION**

7007 0710 0000 8014 9899

Send To

Glendale Colony

PS Form 3800, August 2006

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:

Glendale Colony
 17866 Glendale Dr.
 Frankfort SD 57440

2. Article Number
 (Transfer from service label)

7007 0710 0000 8014 9899

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent
 Addressee
- B. Received by (Printed Name)
 SHANNY K. LEWIS
- C. Date of Delivery
 6/30/2012
- D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

JUL 03 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

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540