

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

7007 0710 0000 8015 0642

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

RECEIVED
 Postmark Here
JUN 29 2012
SOUTH DAKOTA PUBLIC UTILITIES COMMISSION

Gerald Nuhsbahmen

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:

Gerald Nuhsbahmen
 37351 178th St
 Redfield SD 57467

2. Article Number
 (Transfer from service label)

7007 0710 0000 8015 0642

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Gerald Nuhsbahmen Agent
 Addressee

B. Received by (Printed Name)
Gerald Nuhsbahmen

C. Date of Delivery
6/30/12

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

RECEIVED
JUL 02 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