

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	\$	<b>RECEIVED</b> Postmark Here <b>JUN 29 2012</b>
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	<b>SOUTH DAKOTA PUBLIC UTILITIES COMMISSION</b>

Sent To

Jeff Schneider

PS Form 3800, August 2006 See Reverse for Instructions

7007 0710 0000 8015 0574

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature                  X <i>Jeff Schneider</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Jeff Schneider</i> C. Date of Delivery <i>7/2/12</i></p> <p>D. Is delivered to the addressee from item 1? <input type="checkbox"/> Yes                  If YES, enter delivery address below: <input type="checkbox"/> No</p> <p style="text-align: center;"><b>RECEIVED</b>  <b>JUL 05 2012</b>  <b>SOUTH DAKOTA F                  UTILITIES COMMI</b></p>
<p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; text-align: center;">                 Jeff Schneider                  5932 25th Ave SD                  Kintyre ND 58549             </div>	<p>3. Service Type  <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number                  (Transfer from service label)</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
7007 0710 0000 8015 0574	

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540