

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 0505

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

Robert Weigel

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:

Robert Weigel
 2651 66th St SE
 Kintyre ND 58549

2. Article Number
 (Transfer from service label)

7007 0710 0000 8015 0505

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Robert Weigel* Agent Addressee

B. Received by (Printed Name) C. Date of Delivery
Robert Weigel 7/2/12

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

JUL 05 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