COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION ■ Complete items 1, 2, and 3. Also complete ☐ Agent item 4 if Restricted Delivery is desired. Addressee ■ Print your name and address on the reverse C. Date of Delivery so that we can return the card to you. Beceived by (Printed Name) Attach this card to the back of the mailpiece, 7-24-2017 or on the front if space permits. D. Is delivery address difference of the second of the sec 1. Article Addressed to: Bratland Farms 43175 SD HW425 Willow Lake, SD JUL 2 6 2017 SOUTH DAKOTA PUBLIC 3. Service Type ILITIES COMMISSION Certified Mail □ Express Mail ☐ Return Receipt for Merchandise ☐ Registered ☐ C.O.D. ☐ Insured Mail 4. Restricted Delivery? (Extra Fee) ☐ Yes 7011 3500 0000 2765 6564 2. Article Number (Transfer from service label) 102595-02-M-1540 Domestic Return Receipt PS Form 3811, February 2004

U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) For delivery information visit our website at www.usps.com		
For delivery information visit our website at www.usps.com		
OFFICIAL USE		
Postage	\$	
Certified Fee		
Certified Fee Return Receipt Fee (Endorsement Required)		Postmark Here
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	
Street, Apt. No.; or PO Box No.		
City, State, ZIP+4 WILLOW Locke		
PS Form 3800, August 2006 See Reverse for Instructions		