SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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. 	A. Signature X Agent Addressee B. Received by Printed Name) C. Date of Delivery D. Is delivery address.
Article Addressed to:	D. Is delivery address to the north of the n
Dale Hoyer	JUL 2 6 2017
	SOUTH DAKOTA PUBLIC
43792 2204 84	3. Service Type
	☐ Certified Mail ☐ Express Mail
Oldham SD	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
57051	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7007 071	0 0000 8014 9004
PS Form 3811, February 2004 Domestic Re	turn Receipt 102595-02-M-1540

4006	U.S. Postal Service TM CERTIFIED MAIL TM RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
무	OFFICIAL HSE	
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4108 0000 O170	Postage \$ Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Postage & Fees \$	Postmark Here
7007	Sent To Street, Apt. No.; or PO Box No. City, State, ZIP+4 PS Form 3800. August 2006	