

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:

Daniel Rommerein
43250 200th St
De Smet SD
57231

2. Article Number
(Transfer from service label)

7007 0710 0000 8014 9516

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Daniel Rommerein

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Daniel Rommerein

C. Date of Delivery

7-24-17

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below ☐ No

RECEIVED

JUL 25 2017

3. Service Type

- ☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

**SOUTH DAKOTA PUBLIC
UTILITIES COMMISSION**

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

\$

Certified Fee

Return Receipt Fee
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees

\$

Postmark
Here

Sent To

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

Daniel Rommerein
De Smet

PS Form 3800, August 2006

See Reverse for Instructions

7007 0710 0000 8014 9516