


| SENDER: COMPLETE THIS SECTION   |   | COMPLETE THIS SECTION ON DELIVERY  |  |  |   |  |   |   |  |   |   |  |  |  |   |
|---|---|--|--|--|---|--|---|---|--|---|---|--|--|--|---|
| <p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>         |   | <p>A. Signature<br/> X <i>Rhona Albrecht</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>   |  |  |   |  |   |   |  |   |   |  |  |  |   |
| <p>1. Article Addressed to:</p> <p><i>Jon Albrecht</i><br/> <i>22286 Hwy 25</i><br/> <i>Howard, SD 57349</i></p> <br>9590 9402 3376 7227 5482 84 |   | <p>B. Received by (Printed Name) <i>Rhona Albrecht</i> C. Date of Delivery <i>3-13-18</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes<br/> If YES, enter delivery address below: <input type="checkbox"/> No</p> <p style="text-align: center;"><b>RECEIVED</b><br/> <b>MAR 15 2018</b><br/> SOUTH DAKOTA PUBLIC<br/> UTILITIES COMMISSION</p>   |  |  |   |  |   |   |  |   |   |  |  |  |   |
| <p>2. Article Number (Transfer from service label)</p> <p>7018 0360 0000 3171 0067</p>  |   | <p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input checked="" type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> </table> |  | <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® | <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ | <input checked="" type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery | <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ | <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Adult Signature  | <input type="checkbox"/> Priority Mail Express®                     |  |  |  |   |  |   |   |  |   |   |  |  |  |   |
| <input type="checkbox"/> Adult Signature Restricted Delivery  | <input type="checkbox"/> Registered Mail™                           |  |  |  |   |  |   |   |  |   |   |  |  |  |   |
| <input checked="" type="checkbox"/> Certified Mail®   | <input type="checkbox"/> Registered Mail Restricted Delivery        |  |  |  |   |  |   |   |  |   |   |  |  |  |   |
| <input type="checkbox"/> Certified Mail Restricted Delivery   | <input type="checkbox"/> Return Receipt for Merchandise             |  |  |  |   |  |   |   |  |   |   |  |  |  |   |
| <input type="checkbox"/> Collect on Delivery  | <input type="checkbox"/> Signature Confirmation™                    |  |  |  |   |  |   |   |  |   |   |  |  |  |   |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery  | <input type="checkbox"/> Signature Confirmation Restricted Delivery |  |  |  |   |  |   |   |  |   |   |  |  |  |   |
| PS Form 3811, July 2015 PSN 7530-02-000-9053  |   | Domestic Return Receipt  |  |  |   |  |   |   |  |   |   |  |  |  |   |

| U.S. Postal Service™<br>CERTIFIED MAIL® RECEIPT<br>Domestic Mail Only  |  |          |  |          |   |          |   |          |  |          |                      |
|--|--|----------|--|----------|---|----------|---|----------|--|----------|----------------------|
| For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.   |  |          |  |          |   |          |   |          |  |          |                      |
| <b>OFFICIAL USE</b>  |  |          |  |          |   |          |   |          |  |          |                      |
| <p>Certified Mail Fee</p> <p>\$ _____</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <table border="0"> <tr> <td><input type="checkbox"/> Return Receipt (hardcopy)</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Return Receipt (electronic)</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Required</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td>\$ _____</td> </tr> </table> <p>Postage</p> <p>\$ _____</p> <p>Total Postage and Fees</p> <p>\$ _____</p> <p>Sent To <i>Jon Albrecht</i></p> <p>Street and Apt. No., or PO Box No. _____</p> <p>City, State, ZIP+4® _____</p> | <input type="checkbox"/> Return Receipt (hardcopy) | \$ _____ | <input type="checkbox"/> Return Receipt (electronic) | \$ _____ | <input type="checkbox"/> Certified Mail Restricted Delivery | \$ _____ | <input type="checkbox"/> Adult Signature Required | \$ _____ | <input type="checkbox"/> Adult Signature Restricted Delivery | \$ _____ | <p>Postmark Here</p> |
| <input type="checkbox"/> Return Receipt (hardcopy)   | \$ _____   |          |  |          |   |          |   |          |  |          |                      |
| <input type="checkbox"/> Return Receipt (electronic)   | \$ _____   |          |  |          |   |          |   |          |  |          |                      |
| <input type="checkbox"/> Certified Mail Restricted Delivery  | \$ _____   |          |  |          |   |          |   |          |  |          |                      |
| <input type="checkbox"/> Adult Signature Required  | \$ _____   |          |  |          |   |          |   |          |  |          |                      |
| <input type="checkbox"/> Adult Signature Restricted Delivery   | \$ _____   |          |  |          |   |          |   |          |  |          |                      |
| PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions   |  |          |  |          |   |          |   |          |  |          |                      |