

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span> <i>Jessica Donovan</i>	
1. Article Addressed to: JUN 17 2011	B. Received by (Printed Name) <i>Jessica Donovan</i>	C. Date of Delivery
Ms. Sandra Lemke, Acting Mayor City of Dupree P.O. Box 276 Dupree, SD 57623	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label)	7009 3410 0000 2597 4915	
PS Form 3811, February 2004	Domestic Return Receipt	102595-02-M-1540

DocKET # CWA-08-2011-0016