

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ 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. 	✱ Signatures <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
1. Article Addressed to:	B. Received by (Printed Name) <i>Rita Brewster</i>	C. Date of Delivery <i>8-25-08</i>
Brewster Construction, Inc. 717 South Broadway Watertown, SD 57201	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
DOCKET NO.: CWA-48-2008-0019		
<i>3RC</i>	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
2. Article Number	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
(Transfer from service label)	<i>7007 3020 0003 3320 6824</i>	
PS Form 3811, February 2004	Domestic Return Receipt	12225-02-00-1000