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

7002 2030 0004 5245 6600

Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

Postmark Here

Sent To: Mr Les Sumption, S+S Comm
CT03-125-127
Street, Apt. No.; or PO Box No.: 125 Railroad Ave SE
City, State, ZIP+4: Aberdeen, SD 57401

PS Form 3800, June 2002 — See Reverse for Instructions

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:

Mr Les Sumption
S+S Comm.
125 Railroad Ave SE
Aberdeen, SD
57401

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Dan R Seaboy ☑ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery
8-4-03

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type CT03-125-127
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7002 2030 0004 5245 6600

PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-1540