

U.S. Postal Service
CERTIFIED MAIL RECEIPT
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RECEIVED
 OCT 25 2011
 MINERALS & MINING PROGRAM

7099 3220 0000 5189 7433

Article Sent To:

Stan Michals, GF & P

Postage	\$ 1.88
Certified Fee	2.85
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 7.03



Name (Please Print) (Postmark to be completed by mailer)
RESPEC
 Street, Apt. No., P.O. Box No.
3824 Jet Dr.
PO Box 725
 City, State, ZIP+4
Rapid City, SD 57709-0725

PS Form 3800, July 1999 See Reverse for Instructions

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. 	<p>A. Signature X <i>Stan Michals</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) Stan Michals</p> <p>C. Date of Delivery 10-17-11</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Mr. Stan Michals SD Department of Game, Fish, & Parks 4725 Jackson Boulevard Rapid City, SD 57702-4804</p>	<p>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.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7099 3220 0000 5189 7433</p>	
PS Form 3811, August 2001	Domestic Return Receipt 102595-02-M-1035

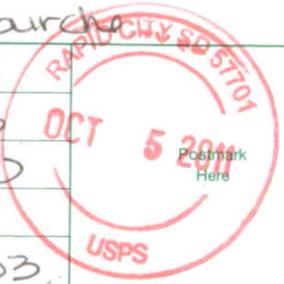
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**U.S. Postal Service
 CERTIFIED MAIL RECEIPT
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7099 3220 0000 5189 7488

Article Sent To:
 NRCS - Belle Fourche

Postage	\$ 1.88
Certified Fee	2.85
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 7.03



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<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. 	<p>A. Signature <input checked="" type="checkbox"/> <i>Walter Kirkman</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Walter Kirkman</i> C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>USDA Natural Resources Conservation Service Belle Fourche Service Center 1837 5th Ave. S Belle Fourche, SD 57717-2086</p>	<p>3. Service Type <input 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.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
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7099 3220 0000 5189 7440

Article Sent To:
 Mike Fosha Arch. Research Ctr

Postage	\$ 1.85	
Certified Fee	2.85	
Return Receipt Fee (Endorsement Required)	2.30	
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 7.03	

Name (Please Print Clearly) (To be completed by mailer)
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- 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. Mike Fosha
 Archaeological Research Center
 2425 E. St. Charles Street
 Rapid City, SD 57709-1257

2. Article Number

(Transfer from service label)

7099 3220 0000 5189 7440

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Susan L. Harst Agent Addressee

B. Received by (Printed Name)

Susan L. Harst

C. Date of Delivery

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

OCT 06 2011

3. Service Type

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

4. Restricted Delivery? (Extra Fee) Yes

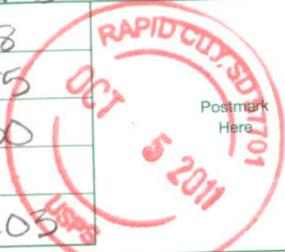
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7099 3220 0000 5189 7457

Article Sent To:
 Marian Atkins BLM

Postage	\$ 1.88
Certified Fee	2.85
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 7.03



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<p>1. Article Addressed to:</p> <p>Marian Atkins Bureau of Land Management 310 Roundup Street Belle Fourche, SD 57717-1698</p>	<p>3. Service Type</p> <p><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.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7099 3220 0000 5189 7457</p>	
PS Form 3811, August 2001	Domestic Return Receipt 102595-02-M-1035

**U.S. Postal Service
CERTIFIED MAIL RECEIPT**
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7099 3220 0000 5189 7518

Article Sent To:
SD Dept of Health

Postage	\$ 1.88
Certified Fee	2.85
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 7.03



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<p>1. Article Addressed to:</p> <p>SD Department of Health Office of Health Protection 615 E. 4th St. Pierre, SD 57501-1700</p>	<p>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.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7099 3220 0000 5189 7518</p>	
PS Form 3811, August 2001	Domestic Return Receipt 102595-02-M-1035

U.S. Postal Service
CERTIFIED MAIL RECEIPT
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7471 7471 5189 0000 3220 7099

Article Sent To:
 SD Dept. of Education

Postage	\$ 1.88
Certified Fee	2.85
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 7.03



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<p>1. Article Addressed to:</p> <p>SD Department of Education and Cultural Affairs 800 Governors Drive Pierre, SD 57501</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>2. Article Number (Transfer from service label) 7099 3220 0000 5189 7471</p>	<p>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.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
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7099 3220 0000 5189 7402

Article Sent To:

Melissa Miller Dept of Tourism

Postage	\$ 1.88
Certified Fee	2.85
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 7.03



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<p>1. Article Addressed to:</p> <p>Ms. Melissa Miller Department of Tourism and State Development Capitol Lake Plaza 500 East Capitol Pierre, SD 57501</p>	<p>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.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7099 3220 0000 5189 7402</p>	

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7099 3220 0000 5189 7426

Article Sent To:
 Raymond Sowers

Postage	\$ 1.88
Certified Fee	2.85
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 7.03

Name (Please Print Last Name): RESPEC
 Street, Apt. No., or PO Box No.: 3824 Jet Dr.
 City, State, ZIP+4: Rapid City, SD 57709-0725

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<p>1. Article Addressed to:</p> <p>Mr. Raymond Sowers Department of Resource Conservation & Forestry Joe Foss Building 523 East Capitol Avenue Pierre, SD 57501</p>	<p>3. Service Type X <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.</p>
<p>2. Article Number (Transfer from service label) 7099 3220 0000 5189 7426</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>

U.S. Postal Service
CERTIFIED MAIL RECEIPT
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7099 3220 0000 5189 7419

Article Sent To:
 Paul Caughlin, G.F.S.P. Pierre

Postage	\$ 1.88
Certified Fee	2.85
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 7.03

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<p>1. Article Addressed to:</p> <p>Mr. Paul Caughlin U.S. Department of Game, Fish, & Parks Joe Foss Building 523 East Capitol Avenue Pierre, SD 57501-3182</p>	<p>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.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7099 3220 0000 5189 7419</p>	
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U.S. Postal Service
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7099 3220 0000 5189 7501

Article Sent To:

LCCD ~~Respect~~

Postage	\$ 1.88
Certified Fee	2.85
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 7.03



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<p>1. Article Addressed to:</p> <p>Lawrence County Conservation District 1140 N Main St, Suite 15 Spearfish, SD 57783-1553</p>	<p>3. Service Type <input 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.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7099 3220 0000 5189 7501</p>	
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	102595-02-M-1035

**U.S. Postal Service
CERTIFIED MAIL RECEIPT**
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7099 3220 0000 5189 7396

Article Sent To:

Jay Vogt, SD State Historical Society

Postage	\$ 1.86
Certified Fee	2.85
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 7.03



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<p>1. Article Addressed to:</p> <p>Mr. Jay Vogt South Dakota State Historical Society 900 Governors Drive Pierre, SD 57501-2217</p>	<p>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.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7099 3220 0000 5189 7396</p>	
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