

12 PU-13-871 Filed 03/07/20

Return receipt - Notice of Hearing
USPS

COMPLETE THIS SECTION ON DELIVERY

Signature

- Agent
- Addressee

- so that we can return the card to you.
- Attach this card to the back of the mailpiece,

B. Received by (Printed Name)

J Haar

C. Date of Delivery

3/6

- Address different from item 1? Yes
- or delivery address below: No

ORDEAN LARS NYGREN
CAPITAL ELECTRIC COOPERATIVE, INC.
4111 STATE ST.
PO BOX 730
BISMARCK ND 58502-0730

3. Service type

- Certified Mail®
- Registered
- Insured Mail
- Priority Mail Express™
- Return Receipt for Merchandise
- Collect on Delivery

4. Restricted Delivery? (Extra Fee)

- Yes

2. Article Number
(Transfer from service label)

7013 2630 0001 2317 0699

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.

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
J. Davis Addressee

B. Received by (Printed Name) C. Date of Delivery
J. Davis *3-6-14*

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

TAMIE ABERLE
MONTANA-DAKOTA UTILITIES CO
400 NORTH FOURTH STREET
BISMARCK ND 58501

Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
(Transfer from service label)

7013 2630 0001 2317 0682