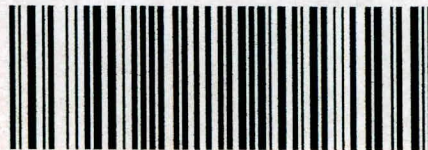


CERTIFIED MAIL™



7013 2630 0001 2317 1603



UNITED STATES POSTAGE
FOREIGN BONES
02 1R \$ 07.19⁰
0002001413 APR 24 2014
MAILED FROM ZIP CODE 58505

RETURN RECEIPT REQUESTED

PUBLIC SERVICE COMMISSION

600 E BOULEVARD AVE DEPT 408
BISMARCK, ND 58505-0480

OFFICIAL MAIL

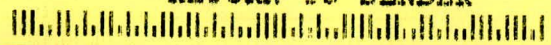
Robert Mitchell

~~████████████████████~~
4905 County Highway 81 South
Horace, ND 58047

RETURN RECEIPT REQUESTED

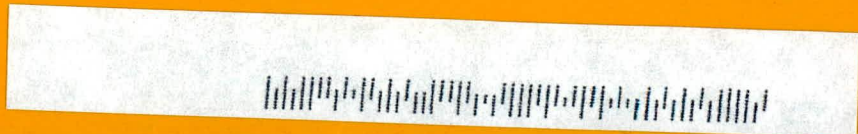
MITC905 580472109-1413 05/02/14
FORWARD TIME EXP RTN TO SEND
MITCHELL
PO BOX 9112
FARGO ND 58106-9112

RETURN TO SENDER



160 GE-11-51 Filed: 5/6/2014 Pages: 2
Mail returned - Robert Mitchell, Notice of Entry of
Order and Notice of Entry of Judgment

USPS



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:

Robert Mitchell
 Mitchell Feeds, Inc.
 4905 County Highway 81 South
 Horace, ND 58047
Certified Mail No. 7013 2630 0001 2317 1603
GE-11-51

2. Article Number

(Transfer from service label)

7013 2630 0001 2317 1603

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Agent AddresseeB. Received by (*Printed Name*)

C. Date of Delivery

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

3. Service Type

 Certified Mail® Priority Mail Express™ Registered Return Receipt for Merchandise Insured Mail Collect on Delivery4. Restricted Delivery? (*Extra Fee*) Yes

GE-11-51