

PU-11-696 Supplemental Order

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:

CASEY JACOBSON
 BASIN ELECTRIC POWER COOPERATIVE
 1717 EAST INTERSTATE AVE.
 BISMARCK ND 58503

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

[Handwritten Signature]

Agent

Addressee

B. Received by (Printed Name)

J. Jacobson

C. Date of Delivery

9-22-14

D. Is delivery address different from item 1? Yes

No

3. 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

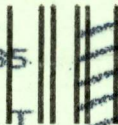
(Transfer from service label)

7013 2250 0001 0313 8815

UNITED STATES POSTAL SERVICE

BISMARCK ND 585

22 SEP 2014 PM 1 T



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

- Sender: Please print your name, address, and ZIP+4® in this box•

ND Public Service Commission
600 E Boulevard Ave. Dept 408
Bismarck, ND 58505-0480



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Return receipt – 7013-2250-0001-0313-8815

OTA
COMMISSION

USPS

