

PU-13-199

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, the front if space permits.

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
 J. Haas 1-31-14

Delivery address different from item 1? Yes
 If yes, enter delivery address below: No

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

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 Return receipt - Order
 USPS

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 0378