

PU-13-840

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Pete Beithon
 Manager, Regulatory Recovery
 PO Box 496
 Fergus Falls, MN 58538-0496
Cert. No. 7017 1070 0000 1507 6873
Case No. PU-13-840

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Mike Pelur*

- Agent
- Addressee

B. Received by (Printed Name)

Mike Pelur

C. Date of Delivery

10-10-17

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



9590 9402 3012 7124

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 Return receipt - 7017-1070-0000-1507-6873
 USPS

2. Article Number (Transfer from service label)

7017 1070 0000 1507 6873

- Collect on Delivery-Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Signature Confirmation
- Signature Confirmation Restricted Delivery

PU-13-840

USPS TRACKING #

TRACKING NO. 9505 5111 1111

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

94

PU-13-840

Filed: 10/16/2017 Pages: 2

Return receipt - 7017-1070-0000-1507-6873

USPS

United States
Postal Service

and ZIP+4® in this box®

RECEIVED
OCT 13 2017
NORTH DAKOTA
PUBLIC SERVICE COMMISSION

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

