

PU-13-874

COMPLETE THIS SECTION ON DELIVERY

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.

A. Signature

X

Agent  
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

2-20-14

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

Address different from item 1?  Yes  
delivery address below:  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 2630 0001 2317 0590