

PU-14-351

8/20/14 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:

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *[Handwritten Signature]*  Agent  
 Addressee

B. Received by (Printed Name) *[Handwritten: J. Jones]* C. Date of Delivery *[Handwritten: 8-25-14]*

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

- 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 8648

PS Form 3811, July 2013

Domestic Return Receipt