

PU-14-620

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:

Bakkenlink Pipeline LLC
 c/o Capitol Corporate Services, Inc.
 720 Main Ave
 Fargo, ND 58103-1807

2. Article Number
(Transfer from service label)

7012 3460 0000 6344 1652

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
Jolayne Bjerk

B. Received by (Printed Name)
JOLAYNE BJERK

C. Date of Delivery
8/6

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

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

UNITED STATES POSTAL SERVICE

05 AUG 2014 PM 11

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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Filed: 8/8/2014

Pages: 2

Return receipt - 7012-3460-0000-6344-1652

USPS

