

PU-14-627

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

2. Article Number
(Transfer from service label)

7013 2630 0001 2317 1191

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

[Handwritten Signature]

Agent

Addressee

B. Received by (Printed Name)

J. Aberle

C. Date of Delivery

10-17-14

D. Is delivery address different from item 1? Yes
If YES, enter 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

UNITED STATES POSTAL SERVICE

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

- Sender: Please print your name, address, and ZIP+4® in this box•

RECEIVED
OCT 20 2014
PUBLIC SERVICE COMMISSION
NORTH DAKOTA
ND Public Service Commission
600 E Boulevard Avenue Dept. 408
Bismarck. ND 58505-0480

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Return receipt – 7013-2630-0001-2317-1191

USPS