

PU-14-697

10/8/14 Notice

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

X

[Handwritten Signature]

Agent

Addressee

B. Received by (*Printed Name*)

J. Brown

C. Date of Delivery

10/5/14

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

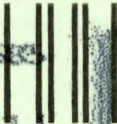
2. Article Number
(*Transfer from service label*)

7013 2630 0001 2317 1214

UNITED STATES POSTAL SERVICE

BISMARCK ND 585

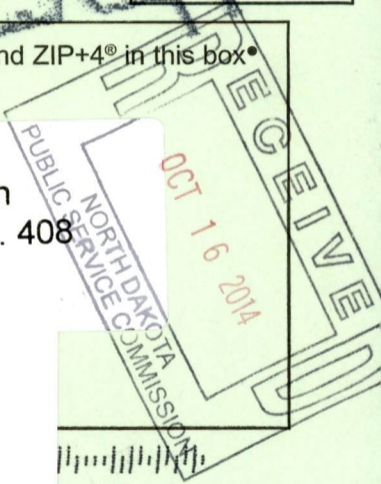
15 OCT 2014 PM 1 L



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 Avenue Dept. 408
Bismarck, ND 58505-0480



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PU-14-697 Filed: 10/16/2014 Pages: 2
Return receipt – 7013-2630-0001-2317-1214

USPS

