

Pu-14-716

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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 Address

Tamie Aberle
 Director of Regulatory Affairs
 Montana-Dakota Utilities Co.
 400 North 4th Street
 Bismarck, ND 58501
Cert. No. 7015 3010 0000 6559 5427

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent
 Addressee
- X** *J Deas*
- B. Received by (Printed Name) C. Date of Delivery
- J Deas* *6-13-16*
- D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

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 Return receipt – 7015-3010-0000-6559-5427
 USPS



9590 9402 1375 5285 3119 60

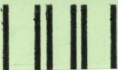
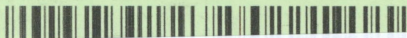
2. Article Number (Transfer from service label)

Cert. No. 7015 3010 0000 6559 5427

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Insured Mail
 - Insured Mail Restricted Delivery (over \$500)
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

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USPS TRACKING #



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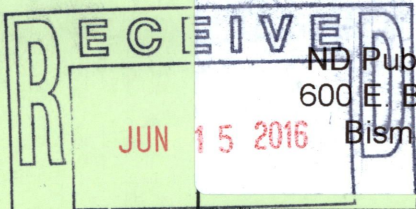
Pages: 2

Return receipt – 7015-3010-0000-6559-5427

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

USPS

, and ZIP+4® in this box•



ND Public Service Commission
600 E. Boulevard Ave. Dept. 408
Bismarck, ND 58505-0480

NORTH DAKOTA
PUBLIC SERVICE COMMISSION

