

PU 14-845

**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:

**TOWER SYSTEMS, INC.**  
**17226 447TH AVE**  
**WATERTOWN, SD 57201-6474**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X** *Elise By*  Agent  
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

**3.18.15**

D. Is delivery address different from item 1?  Yes  
 No

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 Return receipt – 7014-1820-0001-3262-8481  
 USPS

3. 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)

7014 1820 0001 3262 8481

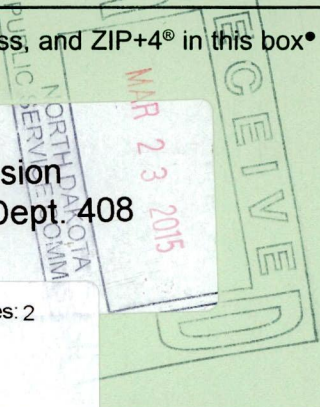
UNITED STATES POSTAL SERVICE



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

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

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



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USPS

