

PU 14-849

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:

SCOTT HANDY
CASS COUNTY ELECTRIC COOPERATIVE, INC.
4100 32ND AVE SW
FARGO, ND 58104

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *De E. Kochmann* Agent
 Addressee

B. Received by (Printed Name)

DEAN E. KOCHMANN

C. Date of Delivery

JAN 14 2015
 Yes
 No

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

6 PU-14-849 Filed 01/16/2015 Pages: 2
 Return receipt – 7014-1820-0001-3262-7682
 USPS

3. Service Type

- Certified Mail®
- Registered
- Insured Mail
- Priority Mail Express™
- Return Receipt for Merchandise
- Collect on Delivery

4. Restricted Delivery? (Extra Fee)

Yes

2. Article Number

(Transfer from service label)

7014 1820 0001 3262 7682

UNITED STATES POSTAL SERVICE

14 JAN 2015 PM 2:11

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 Avenue Dept. 408
Bismarck, ND 58505-0480

6

PU-14-849

Filed: 1/16/2015

Pages: 2

Return receipt – 7014-1820-0001-3262-7682

USPS

RECEIVED
JAN 16 2015
PUBLIC SERVICE COMMISSION
NORTH DAKOTA