

PU-15-143

**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 A Aberle  
 Director of Regulatory Affairs  
 Montana-Dakota Utilities Co  
 400 North Fourth Street  
 Bismarck, ND 58501

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

5-4-15

D. Is delivery address different from item 1?  Yes

No

8 PU-15-143 Filed 05/05/2015 Pages: 2  
 Return receipt – 7014-1820-0001-3262-7781  
 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

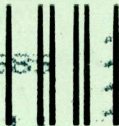
(Transfer from service label)

7014 1820 0001 3262 7781

UNITED STATES POSTAL SERVICE

BISMARCK ND 58505

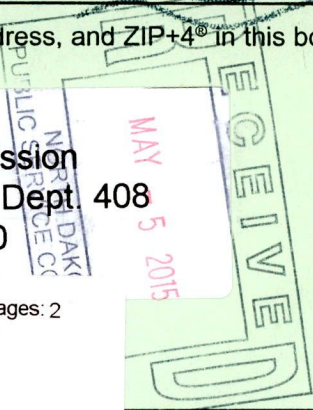
04 MAY 2015 PM 1 L



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



8

PU-15-143

Filed: 5/5/2015

Pages: 2

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USPS

