

pu-15-166

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.

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

[Handwritten Signature]

8/24/16

Keith Demke
 City of Bismarck Public Works
 PO Box 5503
 Bismarck, ND 58506-5503

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 Return receipt – 7016-0600-0000-4633-7607
 USPS

Cert. No. 7016 0600 0000 4633 7607
PU-15-166



9590 9402 1906 6104 9452 23

2. Article Number (Transfer from service label)

Cert. No. 7016 0600 0000 4633 7607

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

pu-15-166

USPS TRACKING #



9590 9402 1906 6104 9452 23

United States
Postal Service

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

RECEIVED

AUG 24 2016

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

NORTH DAKOTA
PUBLIC SERVICE COMMISSION

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

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USPS

