

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.

Article Addressed to:

Bruce R. Carlson-General Manager/C
Verendrye Electric Cooperative, Inc.
615 Highway 52 West
Velva, ND 58790-7417
Cert. No. 7015 0920 0001 6791 8640

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Alesha Keller*

Agent
 Address

B. Received by (Printed Name)

Alesha Keller

C. Date of Delivery

8/31/15

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

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Return receipt – 7015-0920-0001-6791-8640
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

Article Number

(Transfer from service label)

7015 0920 0001 6791 8640

UNITED STATES POSTAL SERVICE

BISMARCK ND 585

03 AUG 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

RECEIVED
AUG - 5 2015

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PU-15-517

Filed: 8/5/2015

Pages: 2

Return receipt - 7015-0920-0001-6791-8640

USPS

NORTH DAKOTA
PUBLIC SERVICE COMMISSION

