

**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.

1. Article Addressed to:

John Kuykendall, Vice - President  
 JSI  
 7852 Walker Drive, Suite 200  
 Greenbelt, Maryland 20770  
**Cert. No. 7015 0640 0006 6433 2090**  
**PU-15-615 and PU-15-616**



9590 9401 0022 5071 5956 78

2. Article Number (Transfer from service label)

**7015 0640 0006 6433 2090**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X** *Christy Peels*

- Agent
- Addressee

B. Received by (Printed Name)

*Christy Peels*

C. Date of Delivery

*12/24*

D. Is delivery address different from item 1?  Yes

26 PU-15-615 Filed 12/29/2015 Pages: 2  
 Return receipt – 7015-0640-0006-6433-2090  
 USPS

25 PU-15-616 Filed 12/29/2015 Pages: 2  
 Return receipt – 7015-0640-0006-6433-2090  
 USPS

- 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)
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

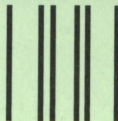
*pu 15-615 & pu 15-616*

UNITED STATES POSTAL SERVICE

ND 587

26 DEC '15

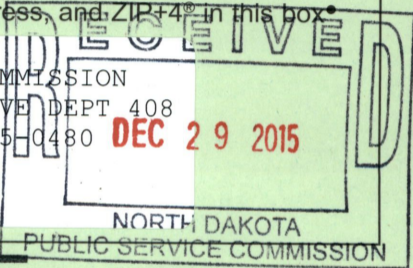
MAIL



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

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

PUBLIC SERVICE COMMISSION  
600 E BOULEVARD AVE DEPT 408  
BISMARCK ND 58505-0480



USPS TRACKING#



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