

**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.

Article Addressed to:

John Kuykendall Vice President

JSI

7852 Walker Drive, Suite 200

Greenbelt, Maryland 20770

Cert. No. 7015 0920 0001 6791 867

PU-15-615 & PU-15-616



9590 9401 0059 5071 4553 89

Article Number (Transfer from service label)

Cert. No. 7015 0920 0001 6791 867

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X Colleen Cook

Agent

Address

B. Received by (Printed Name)

Colleen Cook

C. Date of Delivery

8 PU-15-615 Filed 08/21/2015 Pages: 2  
Return receipt – 7015-0920-0001-6791-8674  
USPS

8 PU-15-616 Filed 08/21/2015 Pages: 2  
Return receipt – 7015-0920-0001-6791-8674  
USPS

3. 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

UNITED STATES POSTAL SERVICE



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

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

N. D. Public Service Commission  
600 E. Boulevard Avenue Dept. 408  
Bismarck, ND 58505-0480

USPS TRACKING#

