

**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:

Tamie Aberle  
 Director of Regulatory Affairs      10  
 Montana-Dakota Utilities Co.  
 400 North 4th Street  
 Bismarck, ND 58501  
 Cert. No. 7015 0640 0006 6433 4612



9590 9401 0020 5205 8897 98

2. Article Number (Transfer from service label)

**7015 0640 0006 6433 4612 PU-15-721**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

12/15

D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No

PU-15-721 Filed 12/11/2015 Pages: 2  
 Return receipt – 7015-0640-0006-6433-4612  
 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

pu-15-721

UNITED STATES POSTAL SERVICE

BISMARCK ND 585

07 DEC 2015 PM 2

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 Ave., Dept. 408  
 Bismarck, ND 58505-0480

RECEIVED  
 DEC 11 2015  
 NORTH DAKOTA  
 SERVICE COMMISSION

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 Return receipt - 7015-0640-0006-6433-4612

USPS

9590 9401 0020 5205 8897 98