

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.

Business Filings Incorporated
 Registered Agent for Central Specialties, Inc.
 314 E. Thayer Avenue
 Bismarck, ND 58501-4018
Cert. No. 7015 3010 0000 6559 9814
PU-15-799

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Kelley Walker

Agent

Addressee

B. Received by (*Printed Name*)

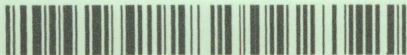
C. Date of Delivery

4/25/16

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

8 PU-15-799 Filed 04/27/2016 Pages: 2
 Return receipt – 7015-3010-0000-6559-9814
 USPS



9590 9402 1366 5285 5130 38

2. Article Number (*Transfer from service label*)

Cert. No. 7015 3010 0000 6559 9814

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

USPS TRACKING #

BISMARCK ND 585

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

8 PU-15-799 Filed: 4/27/2016 Pages: 2
Return receipt - 7015-3010-0000-6559-9814

USPS

and ZIP+4® in this box®

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

RECEIVED
APR 27 2016
NORTH DAKOTA
PUBLIC SERVICE COMMISSION

