

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:

Central Specialties, Inc.
 6325 County Road 87 SW
 Alexandria, MN 56308-5361
Cert. No. 7015 3010 0000 6559 9807
PU-15-799



9590 9402 1366 5285 5130 45

2. Article Number (Transfer from service label)

Cert. No. 7015 3010 0000 6559 9807**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *Alexis Ryckhus*

- Agent
 Addressee

B. Received by (Printed Name)

Alexis Ryckhus

C. Date of Delivery

4/25

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

9 PU-15-799 Filed 04/28/2016 Pages: 2
 Return receipt – 7015-3010-0000-6559-9807
 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

USPS TRACKING #



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

9

PU-15-799

Filed: 4/28/2016

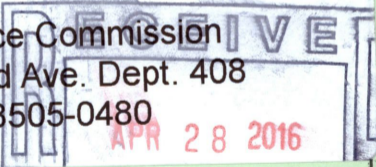
Pages: 2

Return receipt - 7015-3010-0000-6559-9807

USPS

nd ZIP+4® in this box®

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



NORTH DAKOTA
PUBLIC SERVICE COMMISSION

