

pu-16-614

**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.

Wade C. Mann  
 Crowley Fleck PLLP  
 PO Box 2798  
 Bismarck, ND 58502-2798  
**Cert. No. 7015 0640 0006 6993 6569**  
**Case No. PU-16-614**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

Agent  
 Addressee

B. Received by (*Printed Name*)

T Mann

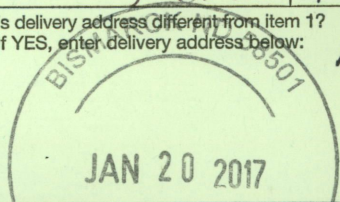
C. Date of Delivery

1-20-17

D. Is delivery address different from item 1?  Yes

If YES, enter delivery address below:

No



9590 9402 2

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 Return receipt - 7015-0640-0006-6993-6569  
 USPS

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

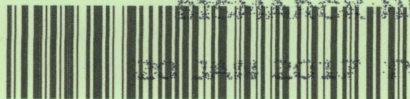
**Cert. No. 7015 0640 0006 6993 6569**

- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)

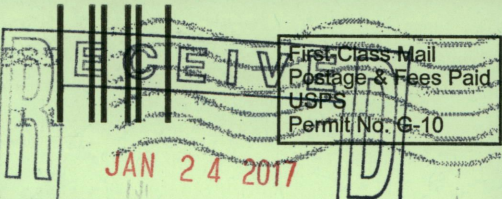
- Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

pu-16-614

USPS TRACKING #



9590 9402 2326 6225 4219 17



United States  
Postal Service

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

NORTH DAKOTA  
PUBLIC SERVICE COMMISSION

*ND Public Service Commission  
600 E. Boulevard Ave. Dept. 408*

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Return receipt - 7015-0640-0006-6993-6569

USPS

