

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.

Chris Brostuen
 Asst. Gen. Mgr./Key Accounts Business Development
 Mountrail-Williams Electric Cooperative, Inc.
 PO Box 1346
 Williston, ND 58802-1346
Cert. No. 7017 2400 0001 0889 8522



9590 9402 363

9 PU-16-684 Filed 04/06/2018 Pages: 2
 Return receipt - 7017-2400-0001-0889-8522
 USPS

2. Article Number (Transfer from service label)

7017 2400 0001 0889 8522

pu-16-684
COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Kevyn Niedel* Agent Addressee

B. Received by (Printed Name)

C. Date of Delivery

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



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

pu-16-684

USPS TRACKING #

9

PU-16-684

Filed: 4/6/2018

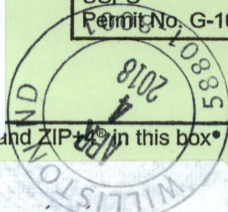
Pages: 2

Return receipt - 7017-2400-0001-0889-8522

First-Class Mail
Postage & Fees Paid
USPS

Permit No. G-10

USPS



United States
Postal Service

Recipient please print your name, address, and ZIP+4® in this box.

RECEIVED
APR - 6 2018

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

NORTH DAKOTA
PUBLIC SERVICE COMMISSION

