

PU-16-756

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.

Tamie Aberle
 Director of Regulatory Affairs
 Montana-Dakota Utilities Co.
 400 North 4th Street
 Bismarck, ND 58501
Cert. No. 7015 0640 0006 6993 6552

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

(Handwritten signature)

- Agent
- Addressee

B. Received by (*Printed Name*)

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 23

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 Return receipt - 7015-0640-0006-6993-6552
 USPS

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

Cert. No. 7015 0640 0006 6993 6552

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

- Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

PU-16-756

USPS TRACKING #

BISMARCK ND



20 JAN 2017 PM

9590 9402 2326 6225 4219 24

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

RECEIVED
JAN 24 2017

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 - 7015-0640-0006-6993-6552

USPS

