

pu-17-97

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.

Joseph Barkie – Chairman
 Mont Township (T155-R102)
 5835 144th Ave. NW
 Williston, ND 58801
Cert. No. 7018 0680 0001 3737 6649



9590 9402 3790 8032 8

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Joseph D. Barkie* Agent
 Addressee

B. Received by (*Printed Name*) *Joseph D. Barkie* C. Date of Delivery *8-6-18*

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

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 Return receipt – 7018-0680-0001-3737-6649
 USPS

2. Article Number (*Transfer from service label*)
7018 0680 0001 3737 6649

- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

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USPS TRACKING #

127

PU-17-97

Filed: 8/8/2018

Pages: 2

Return receipt - 7018-0680-0001-3737-6649

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

USPS

United States
Postal Service

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

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

RECEIVED
NORTH DAKOTA
PUBLIC SERVICE COMMISSION

AUG - 8 2018

RECEIVED

