

pu-17-144

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. 7016 1970 0001 1484 4559



9590 9402 2318 6225

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent Addressee
 X 
- B. Received by (Printed Name) 
- C. Date of Delivery
 4-19-17
- D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

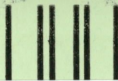
8 PU-17-144 Filed 04/21/2017 Pages: 2
 Return receipt - 7016-1970-0001-1484-4559
 USPS

2. Article Number (Transfer from service label)
Cert. No. 7016 1970 0001 1484 4559

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

pu-17-144

USPS TRACKING #



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

8 **PU-17-144** Filed: 4/21/2017 Pages: 2
Return receipt - 7016-1970-0001-1484-4559

USPS

Uni
Pos

ZIP+4® in this box*

RECEIVED
APR 21 2017

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

NORTH DAKOTA
PUBLIC SERVICE COMMISSION

