

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.

Travis Jacobson
 Director of Regulatory Affairs
 Montana-Dakota Utilities Co., Inc.
 400 North Fourth Street
 Bismarck, ND 58501
 Cert. No. 7020 1290 0001 6150 3342
 Case No. PU-17-192



9590 9402 6024 006

7020 1290 0001 6150 3342

COMPLETE THIS SECTION ON DELIVERY

A. Signature

S. Mosbrucker Agent
 Addressee

B. Received by (Printed Name)

MS C-19

C. Date of Delivery

2-19-21

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

3. Service Type

Priority Mail Express®

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Return receipt

United States Postal Service

Collect on Delivery

Collect on Delivery Restricted Delivery

Insured Mail

Insured Mail Restricted Delivery (over \$500)

Signature Confirmation™

Signature Confirmation

Restricted Delivery

USPS TRACKING #



9590 9402

United States
Postal Service

RECEIVED

FEB 22 2021

NORTH DAKOTA
PUBLIC SERVICE COMMISS

66

PU-17-192
Return receipt

Filed: 2/22/2021

Pages: 2

United States Postal Service

First-Class Mail
Fees Paid
G-10

Box*

ND Public Service Commission
Attn: Public Utilities Division
600 E Boulevard Ave. Dept. 408
Bismarck, ND 58505-0480