

pu-17-196

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.

Tamie Aberle
 Director of Regulatory Affairs
 Montana-Dakota Utilities Co.
 400 North 4th Street
 Bismarck, ND 58501
Cert. No. 7015 0640 0006 6993 9256



9590 9402 2320

11 PU-17-196 Filed 08/01/2017 Pages: 2
 Return receipt - 7015-0640-0006-6993-9256
 USPS

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

[Handwritten signature]

- Agent
- Addressee

B. Received by (*Printed Name*)

C. Date of Delivery

7/31/17

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

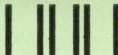
2. Article Number (*Transfer from service label*)

Cert. No. 7015 0640 0006 6993 9256

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

pu-17-196

USPS TRACKING #



11

PU-17-196

Filed: 8/1/2017

Pages: 2

Return receipt - 7015-0640-0006-6993-9256

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

USPS

and ZIP+4® in this box*

Postal Service

RECEIVED

AUG - 1 2017

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

NORTH DAKOTA
PUBLIC SERVICE COMMISSION