

pu-17-295

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. *Article Number*

Tamie Aberle
 Director of Regulatory Affairs
 Montana-Dakota Utilities Co.
 400 North 4th Street
 Bismarck, ND 58501
Cert. No. 7017 1070 0000 1507 6781

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

J Aberle

Agent

Addressee

B. Received by (*Printed Name*)

J Aberle

C. Date of Delivery

9/26/17

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No



9590 9402 2318 6

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 Return receipt - 7017-1070-0000-1507-6781
 USPS

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

7017 1070 0000 1507 6781

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

pu-17-295

USPS TRACKING #

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

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Return receipt - 7017-1070-0000-1507-6781

USPS

ss, and ZIP+4® in this box*

RECEIVED
SFP 23 2017
NORTH DAKOTA
PUBLIC SERVICE COMMISSION

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

