

Pu-17-331


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. 7015 0640 0006 6993 9515

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X 

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

9/22/17

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



9590 9402 2318 6225 3

8 PU-17-331 Filed 09/25/2017 Pages: 2
 Return receipt - 7015-0640-0006-6993-9515
 USPS

2. Article Number (Transfer from service label)

Cert. No. 7015 0640 0006 6993 9515

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

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USPS TRACKING #



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

8

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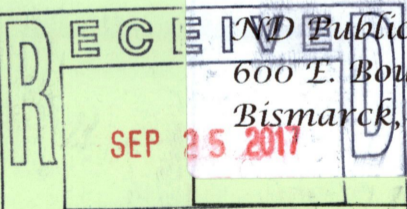
Filed: 9/25/2017

Pages: 2

Return receipt - 7015-0640-0006-6993-9515

USPS

and ZIP+4® in this box®



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

NORTH DAKOTA
PUBLIC SERVICE COMMISSION