

pu-18-224

**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. Addressee's Name  
 Mylo Einarson – President/CEO  
 NoDak Electric Cooperative, Inc.  
 PO Box 13000  
 Grand Forks, ND 58208-3000  
**Cert.No. 7017 2400 0889 9109**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X *T. McDaniel*  Agent  Addressee

B. Received by (Printed Name) C. Date of Delivery  
*T. McDaniel* *7/17/18*

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



9590 9402 3790 8032

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 Return receipt – 7017-2400-0001-0889-9109  
 USPS

2. Article Number  
**7017 2400 0001 0889 9109**

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

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USPS TRACKING #

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Return receipt - 7017-2400-0001-0889-9109

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

USPS

United States  
Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box •

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

