

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.

Tim Krumwiede-Operations Supervisor
 Verendrye Electric Cooperative, Inc.
 615 Highway 52 W
 Velva, ND 58790-7417
 Cert. No. 7019 0700 0000 6174 4059
 Case No. PU-18-374

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X TR RRI CIG

Agent
 Addressee

B. Received by (Printed Name)

VEC

C. Date of Delivery

6/1/20

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



9590 9402 5222

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Return receipt

United States Postal Service

7019 0700 0000 6174 4059

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

USPS TRACKING# 9505 585



9590 9402 5222 9122 3380 49

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

RECEIVED

United States
Postal Service

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

JUN 7 2020

NORTH DAKOTA
PUBLIC SERVICE COMMISSION
ND Public Service Commission
Attn: Public Utilities Division
600 E Boulevard Ave, Dept. 408

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Return receipt

United States Postal Service

