

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 Addressed to:

Warren Colby
 846 44th St. N
 Voltaire, ND 58792
 Cert. No. 7019 2280 0001 7941 6966
 Case No. PU-18-374



9590 9402 5377 9189 4894 48

2. / 7019 2280 0001 7941 6966

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Renee Colby

 Agent AddresseeB. Received by (*Printed Name*)

C. Date of Delivery

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

3. Service Type

 Priority Mail Express®

38

PU-18-374 Filed 09/17/2020

Pages: 2

Return receipt

United States Postal Service

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

Restricted Delivery

USPS TRACKING# ARCK ND 585

First-Class Mail
Paid



38 **PU-18-374**
Return receipt

Filed: 9/17/2020

Pages: 2

United States Postal Service

8590 9402 5374

United States
Postal Service

NORTH DAKOTA
PUBLIC SERVICE COMMISSION

ND Public Service Commission
Attn: Public Utilities Division
600 E. Boulevard Ave. Dept. 408
Bismarck, ND 58505-0480

RECEIVED
SEP 17 2020

