

pu-18-399

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:

Erica Johnsrud
 McKenzie County Auditor
 201 5th St NW Suite 543
 Watford City, ND 58554
 Gen. No. 7018 0680 0001-3738 1070
 Case No. PU-18-399



9590 9402 2853 7069

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

2. Article Number (Transfer from service label)

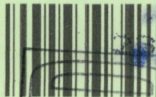
7018 0680 0001 3738 1070

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

pu-18-399

14 PU-18-399 Filed 01/28/2019 Pages: 2
 Return receipt - 7018-0680-0001-3738-1070
 USPS

USPS TRACKING#



14

PU-18-399

Filed: 1/28/2019

Pages: 2

Return receipt - 7018-0680-0001-3738-1070

Mail
es Paid

10

USPS

959079402

United States
Postal Service

JAN 28 2019

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

RECEIVED

NORTH DAKOTA
PUBLIC SERVICE COMMISSION

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

