

PU 19-85

**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. A

Erica Johnsrud  
 McKenzie County Auditor  
 201 5th St. NW, Suite 543  
 Watford City, ND 58554  
 Cert. No. 7018 2290 0000 6607 7795  
 Case No. PU-19-85

**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



9590 9402 4492 8248

9 PU-19-85 Filed 03/27/2019 Pages: 2  
 Return receipt - 7018-2290-0000-6607-7995  
 USPS

7018 2290 0000 6607 7995

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

PU-19-85

USPS TRACKING# BISMARCK ND 58505

First-Class Mail

9

PU-19-85

Filed: 3/27/2019

Pages: 2

Return receipt - 7018-2290-0000-6607-7995

Paid



9540 9402 4492

USPS

United States  
Postal Service

MAR 27 2019

NORTH DA  
UBLIC SERVICE

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

