

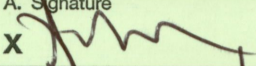
PU-19-285

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, *over the front if space permits*

1.
 Tamie Aberle
 Director of Regulatory Affairs
 Montana-Dakota Utilities Company
 400 North 4th Street
 Bismarck, ND 58501
 Cert. No. 7018 0680 0001 3737 7158

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X  Agent
 Addressee

B. Received by (*Printed Name*)
 Scott R Mosburn

C. Date of Delivery
 8-23-19

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



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 Return receipt - 7018-0680-0001-3737-7158
 USPS

2. Article Number (*Transfer from service label*)
7018 0680 0001 3737 7158

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

USPS TRACKING#



9590 9402 37

USPS

United States
Postal Service

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Return receipt - 7018-0680-0001-3737-7158

First-Class Mail

Postage Paid

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

RECEIVED
PUBLIC SERVICE COMMISSION
AUG 26 2019

