

PU-19-294

**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, the front if space permits.

Mike Teske  
 Slope County Commission  
 12607 75th S. SW  
 Scranton, ND 58620-9607  
 Cert. No. 7019 0700 0000 6174 0235

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 X *Carla Teske*  Addressee

B. Received by (*Printed Name*) *Carla Teske*

C. Date of Delivery *10/3/19*

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



9590 9402 4618 8323

19 PU-19-294 Filed 10/08/2019 Pages: 2  
 Return receipt - 7019-0700-000-6174-0235  
 USPS

2. Article Number (*Transfer from service label*)  
**7019 0700 0000 6174 0235**

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

USPS TRACKING #



19

PU-19-294

Filed: 10/8/2019

Pages: 2

Return receipt - 7019-0700-000-6174-0235

Postage & Fees Paid

USPS

9590 9402 463

United States  
Postal Service

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

OCT 8 2019

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

RECEIVED

ND PUBLIC SERVICE COMMISSION

