

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.

Gene Harris
 Crosby Creek Consulting, LLP
 11820 10th St NW
 Killdeer, ND 58640-9149
 Cert. No. 7019 0700 0000 6174 3571
 Case No. PU-19-300

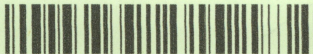
COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Gene Harris* Agent Addressee

B. Received by (Printed Name)
Gene Harris

C. Date of Delivery
1-27-20

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



9590 9402 5222 9122 35

10 PU-19-300 Filed 02/04/2020 Pages: 2
 Return receipt - 7019-0700-0000-6174-3571
 USPS

7019 0700 0000 6174 3571

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

USPS TRACKING #

First-Class Mail



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PU-19-300

Filed: 2/4/2020

Pages: 2

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Return receipt - 7019-0700-0000-6174-3571

0

9570 9402 522

USPS

United States
Postal Service

2020

FEB 4

RECEIVED

MONDAY
PUBLIC SERVICE

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

