

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. /
 Travis Jacobson
 Director of Regulatory Affairs
 Montana-Dakota Utilities Co.
 400 North 4th Street
 Bismarck, ND 58501
 Cert. No. 7019 2280 0001 7941 6959
 Case No. PU-20-197



9590 9402 5377 9189 4894 55

2. /
 7019 2280 0001 7941 6959

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X S Mosbrucker Agent
 Addressee

B. Received by (Printed Name)

MS C-19

C. Date of Delivery

8-31-20

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

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 Return receipt
 United States Postal Service

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

USPS TRACKING #



9590 9403 5377

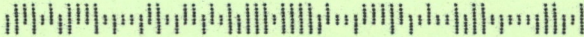
United States
Postal Service

REGISTRATION

SEP 2 2020

NORTH DAKOTA
PUBLIC SERVICE COMMISSION

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13 PU-20-197 Filed: 9/2/2020
Return receipt
Pages: 2
United States Postal Service

First-Class Mail
Postage Paid
Permit No. 610

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