

**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.

Travis Jacobson  
 Director of Regulatory Affairs  
 Montana-Dakota Utilities Co.  
 400 North 4th Street  
 Bismarck, ND 58501  
 Cert. No. 7019 2280 0001 7941 2791  
 Case No. PU-20-335



9590 9402 5377 9189 4962

2. Art

7019 2280 0001 7941 2791

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*X S. Mosbrucker*  Agent  
 Addressee

B. Received by (*Printed Name*)

*mf C-19*

C. Date of Delivery

*7-27-20*

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

3. Service Type

Priority Mail Express®

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Return receipt

United States Postal Service

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

USPS TRACKING #



9590 9402

United States  
Postal Service

RECEIVED

JUL 29 2020

NORTH DAKOTA  
PUBLIC SERVICE COMMISSION

8

PU-20-335  
Return receipt

Filed: 7/29/2020

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United States Postal Service

First-Class Mail  
Postage & Fees Paid  
No. G-10

this box\*

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

