

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 N 4th Street
 Bismarck, ND 58501
 Cert. No. 7020 1290 0001 6150 6046
 Case No. PU-20-440



9590 9402 6024 0069 3948

7020 1290 0001 6150 6046

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *S. Mosbrucker* Agent
 Addressee

B. Received by (Printed Name)

MS C-19

C. Date of Delivery

1-8-202

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

3. ~~Service~~ Type

Priority Mail Express®

18 PU-20-440 Filed 01/12/2021 Pages: 2
 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 6

18

PU-20-440
Return receipt

Filed: 1/12/2021

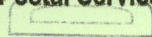
Pages: 2

Mail
Fees Paid

G-10

United States Postal Service

United States
Postal Service



RECEIVED

JAN 12 2021

NORTH DAKOTA

PUBLIC SERVICE COMMISSION

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

Box*