

**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.

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X** *Covid-19 DE*  Agent  
 Addressee

B. Received by (Printed Name)

*Covid 19*

C. Date of Delivery

*2-20-21*

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

Keith A. Larson  
 Daktel Communications, LLC  
 630 5th St N  
 Carrington, ND 58421  
 Cert. No. 7020 1290 0001 6150 3397  
 Case No. PU-21-41



9590 9402 6024 0069 3925

3. Service Type

Priority Mail Express®

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Return receipt

United States Postal Service

7020 1290 0001 6150 3397

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

- Signature Confirmation™
- Signature Confirmation Restricted Delivery

USPS TRACKING#

ARGO ND 931

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



10

PU-21-41  
Return receipt

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Pages: 2

9590 9402

United States Postal Service

United States  
Postal Service

is box®

RECEIVE

FEB 22 2021

NORTH DAKOTA

PUBLIC SERVICE COMMISSION

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

