

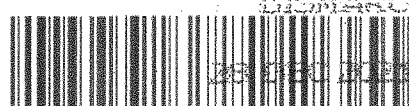
PU-21-441

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <input type="checkbox"/> Agent Erica Johnson <input type="checkbox"/> Addressee</p> <p>C. Date of Delivery 1/23/21</p>
<p>1. Article Addressed to:</p> <p>Erica Johnsrud, Auditor/Treasure McKenzie County 201 5th St NW, Suite 543 Watford City, ND 58854 Cert. No. 7020 1290 0000 1334 4604 Case No. PU-21-441</p>  <p>9590 9402 6611 1028 1226 68</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>2. Article Number (Transfer from service label) <b>7020 1290 0000 1334 4604</b></p>	<p>3. Service Type</p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Adult Signature</li> <li><input type="checkbox"/> Adult Signature Restricted Delivery</li> <li><input checked="" type="checkbox"/> Certified Mail®</li> <li><input type="checkbox"/> Certified Mail Restricted Delivery</li> <li><input type="checkbox"/> Collect on Delivery</li> <li><input type="checkbox"/> Collect on Delivery Restricted Delivery</li> <li><input type="checkbox"/> Insured Mail</li> <li><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</li> <li><input type="checkbox"/> Priority Mail Express®</li> <li><input type="checkbox"/> Registered Mail™</li> <li><input type="checkbox"/> Registered Mail Restricted Delivery</li> <li><input type="checkbox"/> Signature Confirmation™</li> <li><input type="checkbox"/> Signature Confirmation Restricted Delivery</li> </ul>

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

USPS TRACKING #



9590 9402 6611 1028 1226 68

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

**United States Postal Service**

**RECEIVED**

JAN - 3 2022

NORTH DAKOTA  
PUBLIC SERVICE COMMISSION

• Sender: Please print your name, address, and ZIP+4® in this box•

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

