

DM-22-369

**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. Article Addressed to:

General Manager  
 CableOne Inc dba Sparklight  
 1024 Page Dr  
 Fargo ND 58103



9590 9402 7113 1251 6410 59

2. Article Number (Transfer from service label)

7020 1290 0001 6150 9412

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Mail  
 Restricted Delivery  
 )

USPS TRACKING #



RECEIVED

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

9590 9402 7113 1251 6410 59

MAY 11 2023

United States  
Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box•  
NORTH DAKOTA  
PUBLIC SERVICE COMMISSION  
600 E BOULEVARD AVE DEPT 408  
BISMARCK ND 58505-0480

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Filed: 5/11/2023

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Return receipt

United States Postal Service