

KCC 126 47-126

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

- 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.

A. Signature
 Agent
 Addressee

Meadows

B. Received by (Printed Name)
Erica Meadows

C. Date of Delivery
12.19.23

1. Article Addressed to:

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

Mr. Larry Thomas
 President, City Commission
 907 Main Ave
 PO Box 467
 Washburn, ND 58577-0467



9590 9402 6880 1104 0452 16

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Insured Mail
 - Insured Mail Restricted Delivery (over \$500)
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

2. Article Number (Transfer from service label)

7022 3330 0000 7993 3100

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

Domestic Return Receipt

USPS TRACKING # BISMARCK ND 585



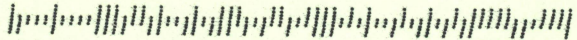
9590 9402 6880 1104 0452 16

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

RECEIVED
DEC 21 2023
 NORTH DAKOTA
 PUBLIC SERVICE COMMISSION

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

Reclamation Division
 Public Service Commission
 600 E Boulevard Ave Dept 408
 Bismarck, ND 58505-0480



REC KC 47 12

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:

McLean County Commissioners
 McLean County Courthouse
 PO Box 108
 Washburn, ND 58577



9590 9402 6880 1104 0452 30

2. Article Number (Transfer from service label)

7022 3330 0000 7993 3087

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Curt Malo* Agent Addressee

B. Received by (Printed Name) *Curt Malo* C. Date of Delivery *12-19-23*

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

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Insured Mail
 - Insured Mail Restricted Delivery (over \$500)
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

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

USPS TRACKING# BISMARCK ND 585



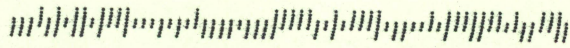
9590 9402 6880 1104 0452 30

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

RECEIVED
 DEC 21 2023
 NORTH DAKOTA
 PUBLIC SERVICE COMMISSION

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

Reclamation Division
 Public Service Commission
 600 E Boulevard Ave Dept 408
 Bismarck, ND 58505-0480



RC - 23-102

RC

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

- 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.

A. Signature
 Courtesy [Signature] Agent
 Addressee

B. Received by (Printed Name) *Courtesy [Signature]* C. Date of Delivery *12-18-23*

1. Article Addressed to:

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

Mr. Leon Weisenburger
 President of City Commission
 City of Underwood
 PO Box 168
 Underwood, ND 58576-0168

3. Service Type
- Priority Mail Express®
 - Registered Mail™
 - Adult Signature Restricted Delivery
 - Registered Mail Restricted Delivery
 - Certified Mail®
 - Signature Confirmation™
 - Certified Mail Restricted Delivery
 - Signature Confirmation Restricted Delivery
 - Collect on Delivery
 - Insured Mail
 - Insured Mail Restricted Delivery (over \$500)

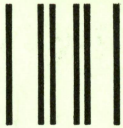
2. Article Number (Transfer from service label)

7022 3330 0000 7993 3094

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

Domestic Return Receipt

USPS TRACKING# BISMARCK ND 585



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

9590 9402 6880 1104 0452 23

United States Postal Service

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

RECEIVED
 DEC 20 2023
 NORTH DAKOTA
 PUBLIC SERVICE COMMISSION

Reclamation Division
 Public Service Commission
 600 E Boulevard Ave Dept 408
 Bismarck, ND 58505-0480

