

NC-24-244, 245

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.

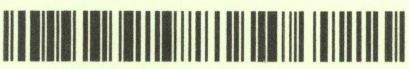
A. Signature
 X *Casey Voigt* Agent Addressee

B. Received by (Printed Name) *Casey Voigt* C. Date of Delivery *7-16-24*

1. Article Addressed to:

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

Casey Lee Voigt and Julie Ann Voigt
 Trustee of the Casey Lee Voigt & Julie Ann Voigt
 Living Trusts
 PO Box 454
 Beulah, ND 58523



9590 9402 8606 3244 8870 26

2. Article Number (Transfer from service label)

7021 2720 0003 0053 7179

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 8606 3244 8870 26



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

United States
Postal Service

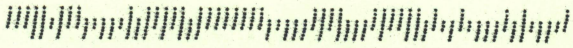
• Sender: Please print your name, address, and ZIP+4® in this box •

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

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JUL 18 2024

NORTH DAKOTA
PUBLIC SERVICE COMMISSION



KE 24-244-243

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:

Shawn Voigt
 PO Box 314
 Beulah, ND 58523-0314



9590 9402 8606 3244 8870 33

2. Article Number (Transfer from service label)

7021 2720 0003 0053 7186

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
 Shawn Voigt 7/15/24

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

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 #



9590 9402 8606 3244 8870 33



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 USPS
 Permit No. G-10

United States Postal Service

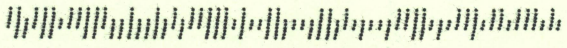
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- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Karmen Eslinger
 1002 16th St NW
 Reeder, ND 58649



9590 9402 8606 3244 8870 40

2. Article Number (Transfer from service label)

7021 2720 0003 0053 7193

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Karmen Eslinger Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

Karmen Eslinger *7-16-24*

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

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#



9590 9402 8606 3244 8870 40



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

United States Postal Service

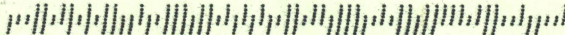
• Sender: Please print your name, address, and ZIP+4® in this box•

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JUL 19 2024

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KC 24-244-240

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:

Donalda Voigt, Life Estate
 PO Box 874
 Beulah, ND 58523



9590 9402 8606 3244 8870 95

2. Article Number (Transfer from service label)

7021 2720 0003 0053 7209

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

X *Sharon Voigt*

B. Received by (Printed Name) C. Date of Delivery
Sharon Voigt 7/15/24

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

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

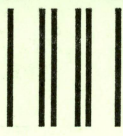
PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

USPS TRACKING#



9590 9402 8606 3244 8870 95



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

United States Postal Service

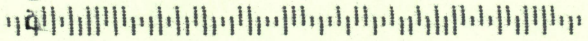
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XC - 24 - 244 - 242

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:

Kenneth Voigt
 1206 3rd Avenue NW, Apt 14
 Beulah, ND 58523



9590 9402 8606 3244 8871 32

2. Article Number (Transfer from service label)

7021 2720 0003 0053 7216

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
 X *K. Voigt*

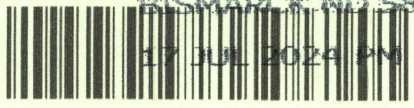
B. Received by (Printed Name) *K. Voigt* C. Date of Delivery

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

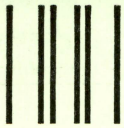
3. Service Type
- | | |
|--|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input checked="" type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | |
| <input type="checkbox"/> Insured Mail | |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) | |

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

USPS TRACKING#



9590 9402 8606 3244 8871 32



First-Class Mail
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 USPS
 Permit No. G-10

United States Postal Service

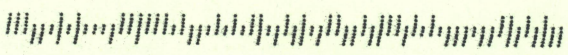
• Sender: Please print your name, address, and ZIP+4® in this box •

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KL-14-14A-14D

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- 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:

Ussery Family ND Ranch, LLLP
 29850 Del Ray Rd.
 Temecula, CA 92591-1811



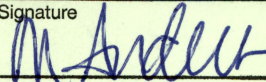
9590 9402 8606 3244 8871 49

2. Article Number (Transfer from service label)

7021 2720 0003 0053 7223

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X  Agent
 Address

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

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#



SN BERNARDINO CA 923

15 JUL 2024 PM 7 L

9590 9402 8606 3244 8871 49

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

United States Postal Service

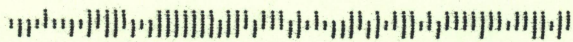
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- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Perry P. Winkler & Beth A. Winkler
 1960 64 1/2 Ave SW
 Zap, ND 58580-9641



9590 9402 8606 3244 8871 56

2. Article Number (Transfer from service label)

7021 2720 0003 0053 7230

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x B. Winkler

Agent

Addressee

B. Received by (Printed Name)

B. Winkler

C. Date of Delivery

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

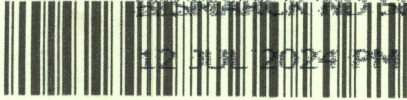
3. Service Type

- 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#



9590 9402 8606 3244 8871 56



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

United States Postal Service

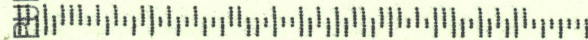
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 Bismarck, ND 58505-0480



KL-294-240

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.
- Article Addressed to:

A. Signature
 X *S Unruh* Agent
 Addressee

B. Received by (Printed Name) *S Unruh* C. Date of Delivery

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

Sharon L. Unruh, Life Estate
 2051 67th Ave SW
 Zap, ND 58580-8046



9590 9402 8606 3244 8871 63

2. Article Number (Transfer from service label)
 7021 2720 0003 0053 7247

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

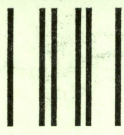
PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

USPS TRACKING#



9590 9402 8606 3244 8871 63



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

United States Postal Service

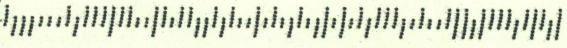
• Sender: Please print your name, address, and ZIP+4® in this box •

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NORTH DAKOTA PUBLIC SERVICE COMMISSION

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



KL-294-290

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:

Shawn Unruh & SheVele Unruh
 2052 67th Ave SW
 Zap, ND 58580-8046



9590 9402 8606 3244 8871 70

2. Article Number (Transfer from service label)

7720 0003 0053 7254

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Unruh*

Agent

Addressee

B. Received by (Printed Name)

Unruh

C. Date of Delivery

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below:

No

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™

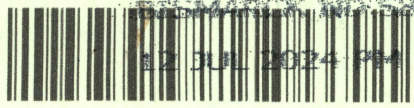
Registered Mail Restricted Delivery

Signature Confirmation™

Signature Confirmation Restricted Delivery

Domestic Return Receipt

USPS TRACKING#



9590 9402 8606 3244 8871 70



First-Class Mail
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 Permit No. G-10

United States Postal Service

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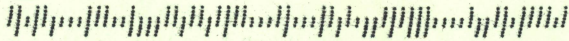
NORTH DAKOTA

PUBLIC SERVICE COMMISSION

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

0480000



KE-249-245

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:

James A. Swenson & Darlene A. Swenson
 Estate
 41 62nd Ave SW
 Bismarck, ND 58523-9155

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Darlene A Swenson Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

Darlene A Swenson 7-13-24

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

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)

7021 2720 0003 0053 7261

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Domestic Return Receipt

USPS TRACKING#



9590 9402 8606 3244 8871 87

First-Class Mail
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 USPS
 Permit No. G-10

United States Postal Service

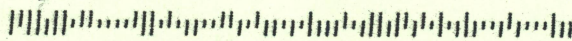
• Sender: Please print your name, address, and ZIP+4® in this box •

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

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JUL 15 2024

NORTH DAKOTA SERVICE CENTER



KL-244-245

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.
- Addressed to:

- A. Signature
 Arlyce Schulte Agent
 Addressee
- B. Received by (Printed Name) C. Date of Delivery
- D. Is delivery address different from item 1? Yes
 No, enter delivery address below: No

Arlyce A. Schulte, Trustee of the Arlyce A. Schulte Living Trust
 2116 41st Ave SW
 Center, ND 58530-9767



9590 9402 8606 3244 8871 94

2. Article Number (Transfer from service label)

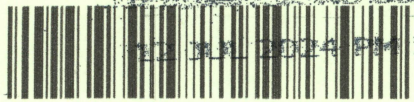
7021 2720 0003 0053 7278

- 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

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Domestic Return Receipt

USPS TRACKING#



9590 9402 8606 3244 8871 94



First-Class Mail
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 USPS
 Permit No. G-10

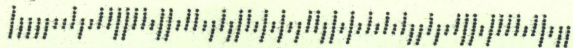
United States Postal Service

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JUL 15 2024

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 Bismarck, ND 58505-0480



KL-249-240

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
 B. Winkler Agent
 Addressee

B. Received by (Printed Name) *B. Winkler* C. Date of Delivery

1. Article Addressed to:

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

Perry P. Winkler & Beth A. Winkler
 Life Estate
 1960 64 1/2 Ave SW
 Zap, ND 58580-9641



9590 9402 8606 3244 8872 00

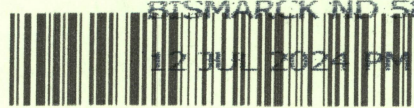
2. Article Number (Transfer from service label)

7021 2720 0003 0053 7285

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#



9590 9402 8606 3244 8872 00

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

**United States
 Postal Service**

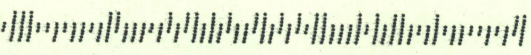
• Sender: Please print your name, address, and ZIP+4® in this box•

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NORTH DAKOTA
 PUBLIC SERVICE COMMISSION

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 600 E Boulevard Ave Dept 408
 Bismarck, ND 58505-0480



KL-149-147

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:

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Jason Voya*

- Agent
- Addressee

B. Received by (Printed Name)

Jason Voya

C. Date of Delivery

7-15

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

North Dakota Department of Trust Lands
P.O. Box 5523
Bismarck, ND 58502-5523



9590 9402 8606 3244 8872 17

2. Article Number (Transfer from service label)

7021 2720 0003 0053 7292

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

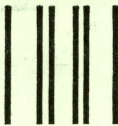
PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

USPS TRACKING#



9590 9402 8606 3244 8872 17



First-Class Mail
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USPS
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United States
Postal Service

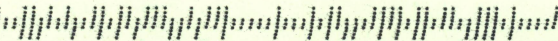
• Sender: Please print your name, address, and ZIP+4® in this box•

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JUL 17 2024

NORTH DAKOTA
PUBLIC SERVICE COMMISSION

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



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:

Ronald E. & Janice J. Gunsch
 6300 County Road 25
 Zap, ND 58580-9683



9590 9402 8606 3244 8872 24

2. Article Number (Transfer from service label)

7021 2720 0003 0053 7308

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *J Gunsch*

Agent

Addressee

B. Received by (Printed Name)

J Gunsch

C. Date of Delivery

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

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

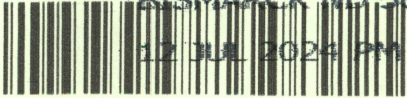
PS Form 3811, July 2020 PSN 7530-02-000-9053

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BISMARCK ND 585

17 JUL 2024 PM 1 L



9590 9402 8606 3244 8872 24

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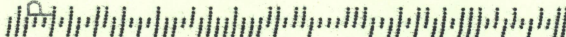
JUL 15 2024

NORTH DAKOTA

PUBLIC SERVICE COMMISSION

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KL-244-245

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:

Claire & Donald Schwalbe
 6345 13th Street SW
 Beulan, ND 58523-9147



9590 9402 8606 3244 8872 31

2. Article Number (Transfer from service label)

7021 2720 0003 0053 7315

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Claire Schwalbe*

- Agent
- Addressee

B. Received by (Printed Name)

Claire Schwalbe

C. Date of Delivery

7/13/24

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

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

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USPS TRACKING#



FARGO ND 58L

13 JUL 2024 PM 1 L

9590 9402 8606 3244 8872 31

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 USPS
 Permit No. G-10

United States Postal Service

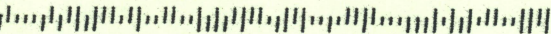
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 Bismarck, ND 58505-0480

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NORTH DAKOTA PUBLIC SERVICE COMMISSION



KL-249-247

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:

Otter Tail Power Company
 215 South Cascade St
 Fergus Falls, MN 56537



9590 9402 8606 3244 8872 48


2. Article Number (Transfer from service label)

7021 2720 0003 0053 7322

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X  Agent
 Addressee

B. Received by (Printed Name)

Amy

C. Date of Delivery

8-7-16

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

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

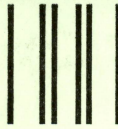
Domestic Return Receipt

USPS TRACKING#



FARGO ND 581
 15 JUL 2024 PM 1 L

9590 9402 8606 3244 8872 48

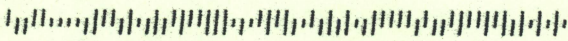


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 600 E Boulevard Ave Dept 408
 Bismarck, ND 58505-0480



SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *WV C19 C3*

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

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:

Northern Municipal Power Agency
123 2nd Street West
Thief River Falls, MN 56701-1912



9590 9402 8606 3244 8872 55

2. Article Number (Transfer from service label)

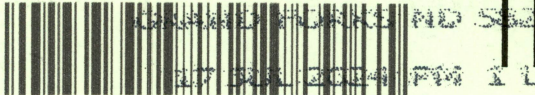
7021 2720 0003 0053 7339

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

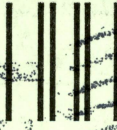
PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

USPS TRACKING#



9590 9402 8606 3244 8872 55



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USPS
Permit No. G-10

United States
Postal Service

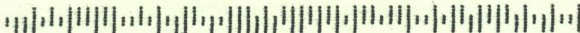
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NORTH DAKOTA
PUBLIC SERVICE COMMISSION

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Bismarck, ND 58505-0480



KL-249-240

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
 X *[Signature]* Agent
 Addressee

B. Received by (Printed Name) *Best* C. Date of Delivery *7-15-24*

1. Article Addressed to:

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

Montana-Dakota Utilities
 PO Box 5650
 Bismarck, ND 58506-5650



9590 9402 8606 3244 8872 62

3. Service Type
- | | |
|---|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input checked="" type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input checked="" type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | |
| <input type="checkbox"/> Insured Mail | |
| <input checked="" type="checkbox"/> Insured Mail Restricted Delivery (over \$500) | |

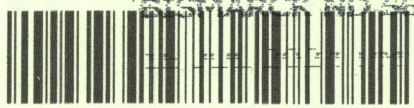
2. Article Number (Transfer from service label)

7021 2720 8003 0053 7346

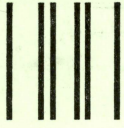
PS Form 3811, July 2020 PSN 7530-02-000-9053

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9590 9402 8606 3244 8872 62



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United States Postal Service

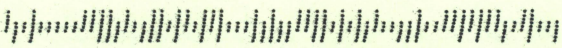
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96-194-297

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:

NorthWestern Corporation
 3010 W 69th St
 Sioux Falls, SD 57108-5613



9590 9402 8606 3244 8872 79

2. Article Number (Transfer from service label)

9589 0710 5270 0129 6571 75

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COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

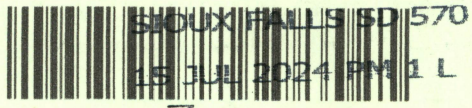
B. Received by (Printed Name) **ARA LIEN**
 C. Date of Delivery **7/15/24**

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

Domestic Return Receipt

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