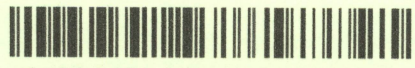


PU-25-172

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.

Dan Larson
 City of Tioga Community Service Director
 16 1st St NE
 PO Box 213
 Tioga, ND 58852
Cert. No. 9589 0710 5270 2139 5698 44
Case No. PU-25-172



9590 9402 8970 4064 9741 41

2. Article Number (Transfer from service label)
9589 0710 5270 2139 5698 44

COMPLETE THIS SECTION ON DELIVERY

A. Signature Shanelle Ramsay
 Agent
 Addressee
 X Shanelle Ramsay
 B. Received by (Printed Name)
 C. Date of Delivery 6/12/25

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

19. PU-25-172 Filed 06/12/2025 Pages: 1
 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
 - Insured Mail
 - Insured Mail Restricted Delivery (over \$500)
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

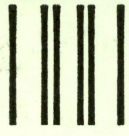
PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

USPS TRACKING# BISMARCK ND 585



7 JUN 2025 AM 1 L



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

9590 9402 8970 4064 9741 41

United States Postal Service

• 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

RECEIVED

JUN 12 2025

