

PU-26-82

**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:**

Havelock Town Ship Zoning Commission  
 and Board of Township Supervisors  
 c/o Tom Rafferty, Chair  
 6451A 141th Ave SW  
 New England, ND 58647  
 Cert. No. 9589 0710 5270 2708 2433 66  
 Case No. PU-26-82



9590 9402 9542 5121 0548 28

**2. Article Number (Transfer from service label)**

9589 0710 5270 2708 2433 66

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X *Tom Rafferty*  Agent  Addressee

B. Received by (Printed Name) \_\_\_\_\_ C. Date of Delivery \_\_\_\_\_

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

8 PU-26-82 Filed 03/18/2026 Pages: 6  
 Return Receipt (6)

United States Postal Service

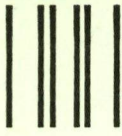
3. Service Type
- Adult Signature
  - Adult Signature Restricted Delivery
  - Certified Mail®
  - Certified Mail Restricted Delivery
  - Collect on Delivery
  - Collect on Delivery Restricted Delivery
  - Insured Mail
  - Insured Mail Restricted Delivery (over \$500)
  - Priority Mail Express®
  - Registered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



9590 9402 9542 5121 0548 28

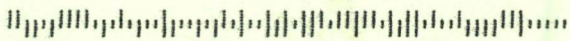


First-Class Mail  
 Postage & Fees Paid  
 USPS  
 Permit No. G-10

RECEIVED  
 MAR 18 2026  
 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



PU-26-82

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.

14 MAR 2028 AM

A. Signature  
 Adult Signature  
 Adult Signature Restricted Delivery  
 Certified Mail®

Agent  
 Address

B. Received by (Printed Name)  
 Amber Reis

C. Date of Delivery

1. Article Addressed to:

Ms. Sara Meier  
 Grant County Auditor/Treasurer  
 Grant County Courthouse  
 106 2nd Ave NE  
 Carson, ND 58529  
 Cert. No. 9589 0710 5270 2708 2433 28  
 Case No. PU-26-82

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



9590 9402 9542 5121 0547 81

2. Article Number (Transfer from service label)

9589 0710 5270 2708 2433 28

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 9542 5121 0547 81

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

RECEIVED  
 MAR 18 2026  
 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



PU-26-82

**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:**

Lorrie Buzalsky  
 Slope County Auditor  
 Slope County Courthouse  
 206 Main St  
 Amidon, ND 58620  
 Cert. No. 9589 0710 5270 2708 2433 42  
 Case No. PU-26-82



9590 9402 9542 5121 0548 04

**2. Article Number (Transfer from service label)**

9589 0710 5270 2708 2433 42

**COMPLETE THIS SECTION ON DELIVERY**

**A. Signature**

X Lorrie Buzalsky

- Agent
- Addressee

**B. Received by (Printed Name)**

LORRIE BUZALSKY

**C. Date of Delivery**

3/13/26

**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

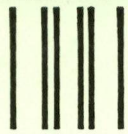
Domestic Return Receipt

**USPS TRACKING #**



9590 9402 9542 5121 0548 04

BISMARCK ND 585



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

United States Postal Service

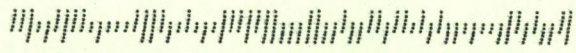
RECEIVED

MAR 18 2026

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



PU-26-82

**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:**

Ms. Jaden Schmidt  
 Oliver County Auditor  
 Oliver County Courthouse  
 115 West Main  
 Center, ND 58530  
 Cert. No. 9589 0710 5270 2708 2433 11  
 Casae No. PU-26-82



9590 9402 9542 5121 0547 74

**2. Article Number (Transfer from service label)**

9589 0710 5270 2708 2433 11

**COMPLETE THIS SECTION ON DELIVERY.**

**A. Signature**

X *Jaden Schmidt*

- Agent
- Addressee

**B. Received by (Printed Name)**

Jaden Schmidt

**C. Date of Delivery**

3/13/26

**D. Is delivery address different from item 1?**

If YES, enter delivery address below:  Yes  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 9542 5121 0547 74



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

RECEIVED

United States Postal Service

MAR 18 2026

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, Ste. Dept. 408  
 Bismarck, ND 58505-0480

PU-26-82

**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:**

Ms. Dawn Rhone  
 Morton County Auditor  
 County Courthouse  
 210 2nd Ave NW  
 Mandan, ND 58554  
 Cert. No. 9589 0710 5270 2708 2433 04  
 Case No. PU-26-82



9590 9402 9542 5121 0547 67

**2. Article Number (Transfer from service label)**

9589 0710 5270 2708 2433 04

**COMPLETE THIS SECTION ON DELIVERY**

**A. Signature**

X Beckroth

- Agent
- Addressee

**B. Received by (Printed Name)**

Beckroth

**C. Date of Delivery**

3-13-2024

- D. Is delivery address different from item 1?**  Yes  No
- 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 #**

BISMARCK ND 585



MAR 13 2024 11

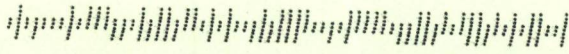
First-Class Mail  
 Postage & Fees Paid  
 USPS  
 Permit No. G-10

9590 9402 9542 5121 0547 67

RECEIVED  
 United States Postal Service  
 MAR 18 08  
 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



pu-26-82

**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:**

Ms. Jeri Schmidt  
 Hettinger County Auditor  
 Hettinger County Courthouse  
 336 Pacific Ave  
 Mott, ND 58646  
 Cert. No. 9589 0710 5270 2708 2433 35  
 Case No. PU-26-82



9590 9402 9542 5121 0547 98

**2. Article Number (Transfer from service label)**

9589 0710 5270 2708 2433 35

**COMPLETE THIS SECTION ON DELIVERY**

**A. Signature**

X *St. Heild*

- Agent
- Addressee

**B. Received by (Printed Name)**

*Stephanie Heild*

**C. Date of Delivery**

*3/13/20*

**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 #**



9590 9402 9542 5121 0547 98



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

**RECEIVED**  
 MAR 18 2020  
 NORTH DAKOTA  
 PUBLIC SERVICE COMMISSION

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

