

pu-08-932

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 Number

Sara E. Bergan
 Stoel Rives LLP
 33 South Sixth Street, Suite 4200
 Minneapolis, MN 55402
Cert. No. 7015 0640 0006 6993 9300
Case No. PU-08-932

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Alex JH*

- Agent
- Addressee

B. Received by (*Printed Name*)

Allison Scott

C. Date of Delivery

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



9590 9402 2326

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 Return receipt - 7015-0640-0006-6993-9300
 USPS

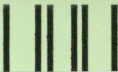
2. Article Number (*Transfer from service label*)

Cert. No. 7015 0640 0006 6993 9300

- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

pu-08-932

USPS TRACKING #



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

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Return receipt - 7015-0640-0006-6993-9300

USPS

and ZIP+4® in this box*

RECEIVED
AUG - 4 2017
NORTH DAKOTA
PUBLIC SERVICE COMMISSION

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