

pu-14-842

**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. **Lawrence Bender**  
**Danielle Krause**  
**Fredrikson & Byron, P.A.**  
**1133 College Drive, Suite 1000**  
**Bismarck, ND 58502-2798**  
**Cert. No. 7015 0640 0006 6993 9409**



9590 9402 2326 6

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *Kim Egge*

- Agent
- Addressee

B. Received by (*Printed Name*)

*Kim Egge*

C. Date of Delivery

*8-18-17*

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

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Return receipt - 7015-0640-0006-6993-9409  
USPS

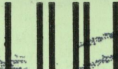
2. Article Number (*Transfer from service label*)

**Cert. No. 7015 0640 0006 6993 9409**

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

pu-14-842

USPS TRACKING #



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

363

PU-14-842

Filed: 8/21/2017

Pages: 2

Return receipt - 7015-0640-0006-6993-9409

USPS

and ZIP+4® in this box\*

RECEIVED  
R

AUG 21 2017

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

NORTH DAKOTA  
PUBLIC SERVICE COMMISSION

