

pu-17-97

**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  
 Brian Bjella / Casey Furey  
 Crowley Fleck PLLP  
 PO Box 2798  
 Bismarck, ND 58502-2798  
**Cert. No. 7018 0680 0001 3737 6700**



9590 9402 3634 730

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 Return receipt 7018-0680-0001-3737-6700  
 USPS

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

**7018 0680 0001 3737 6700**

**COMPLETE THIS SECTION ON DELIVERY**

**A. Signature**

X *[Handwritten Signature]*

- Agent
- Addressee

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

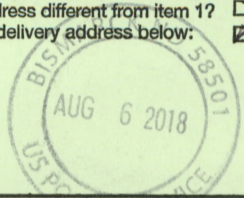
*[Handwritten Name]*

**C. Date of Delivery**

*[Handwritten Date]*

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

If YES, enter delivery address below:  No



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

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Return receipt 7018-0680-0001-3737-6700

USPS

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•

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

REC-115  
AUG - 7 2018  
PUBLIC SERVICE COMMISSION