

PU-17-102

**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,

1. Christine Schwartz  
 Regulatory Administrator  
 NSPM Rates and Regulatory Affairs  
 414 Nicollet Mall, 401-7  
 Minneapolis, MN 55401  
 Cert. No. 7021 2720 0003 0049 2058  
 Case No. PU-17-102



9590 9402 7113 1251 6418 13

7021 2720 0003 0049 2058

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature  Agent  
 Addressee  
*[Handwritten Signature]*
- B. Received by (Printed Name)  Agent  
 Addressee  
*KEVIN INSTAD*
- C. Date of Delivery  Agent  
 Addressee  
*7-6-22*
- D. Is delivery address different from item 1?  Yes  
 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

USPS TRACKING #



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

9590 9402 7113 2251 6418 13

United States  
Postal Service

RECEIVED

JUL 11 2022

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

90 PU-17-102  
Return receipt

Filed: 7/11/2022

Pages:

