

pu-17-232/17-233

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. **Karl Liepitz**
 Associate General Counsel
 MDU Resources Group Inc.
 PO Box 5650
 Bismarck, ND 58502-5560
Cert. No. 7015 0640 0006 6993 9027



9590 9402 2326 6225 4245 50

2. Article Number (Transfer from service label)

Cert. No. 7015 0640 0006 6993 9027

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

6/22/17

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

9 PU-17-233 Filed 06/23/2017 Pages: 2
Return receipt - 7015-0640-0006-6993-9027

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Return receipt - 7015-0640-0006-6993-9027

- Insured Mail
- Insured Mail Restricted Delivery (over \$500)

- Signature Confirmation
- Restricted Delivery

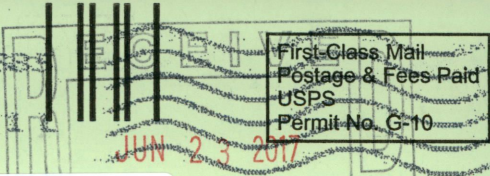
pu17-232/17-233

USPS TRACKING #



BISMARCK ND 58505

02 JUN 2017 PN 1 L



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

JUN 23 2017

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Return receipt - 7015-0640-0006-6993-9027

and ZIP+4® in this box®

POSTAL SERVICE COMMISSION

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

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Return receipt - 7015-0640-0006-6993-9027

