

pu-17-295

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. /

Paul Sanderson
 Attorney for MDU
 Evenson Sanderson PC
 1100 College Drive, Suite 5
 Bismarck, ND 58501-1214
Cert. No. 7017 2400 0001 0889 8812



9590 9402 3634 7

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Brenda V. Tek

- Agent
 Addressee

B. Received by (Printed Name)

Brenda V. Tek

C. Date of Delivery

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

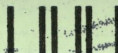
2. Article Number (Transfer from service label)

7017 2400 0001 0889 8812

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

pu-17-295

USPS TRACKING #



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

113 PU-17-295 Filed: 3/12/2018 Pages: 2
Return receipt - 7017-2400-0001-0889-8812

USPS

and ZIP+4® in this box®

Postal Service

RECEIVED
MAR 12 2018

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

NORTH DAKOTA
PUBLIC SERVICE COMMISSION

