

pu-17-346

**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  
 Assistant General Counsel  
 MDU Resources Group, Inc.  
 PO Box 5650  
 Bismarck, ND 58506-5650  
**Cert. No. 7017 1070 0000 1507 6675**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

*(Handwritten signature)*

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

9/25/17

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



9590 9402 3012 71

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 Return receipt - 7017-1070-000-1507-6675  
 USPS

2. Article Number (Transfer from service label)

**7017 1070 000 1507 6675**

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

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USPS TRACKING #



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

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PU-17-346

Filed: 9/26/2017

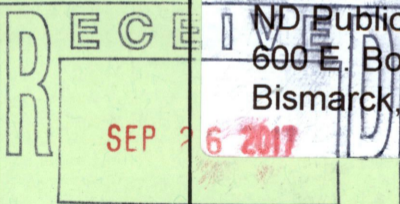
Pages: 2

Return receipt - 7017-1070-000-1507-6675

USPS

United States  
Postal Service

and ZIP+4® in this box•



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

NORTH DAKOTA  
PUBLIC SERVICE COMMISSION

