

pu-17-397

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. Address

Lawrence Bender
 Fredrikson & Byron P. A.
 1133 College Drive Suite 1000
 Bismarck, ND 58501-1215
Cert. No. 7017 2400 0001 0890 4551

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Kim Egger*

- Agent
- Addressee

B. Received by (Printed Name)

Kim Egge

C. Date of Delivery

3/16/18

D. Is delivery address different from item 1? If YES, enter delivery address below:

- Yes
- No



9590 9402 3634 730

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 Return receipt - 7017-2400-0001-0890-4551
 USPS

2. Article Number (Transfer from service label)

7017 2400 0001 0890 4551

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

- Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

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USPS TRACKING #

45

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Pages: 2

Return receipt - 7017-2400-0001-0890-4551

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

USPS

ZIP+4® in this box*

Unit
Postal Service

RECEIVED
MAR 19 2018
NORTH DAKOTA
PUBLIC SERVICE COMMISSION
NORTH DAKOTA
PUBLIC SERVICE COMMISSION

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

