

PU-18-24

**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. Article Addressed to:

Wade C. Mann  
 Crowley Fleck PLLP  
 PO Box 2798  
 Bismarck, ND 58502-2798  
 Cert. No. 7020 2450 0000 1344 2130  
 Case No. PU-18-24



9590 9402 6611 1028 1242 42

2. 7020 2450 0000 1344 2130

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*[Handwritten Signature]*  Agent  
 Addressee

B. Received by (Printed Name)

*[Handwritten: A Soy]*

C. Date of Delivery

*[Handwritten: 9/20/21]*

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

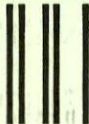


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 Return receipt  
 United States Postal Service

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 6611 1028 1242 42

United States  
Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box•

OCT 2021

NORTH DAKOTA  
PUBLIC SERVICE COMMISSION

ND Public Service Commission  
Attn: Public Utilities Division  
600 E Boulevard Ave. Dept. 408

114

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Return receipt

United States Postal Service

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