

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.

Lawrence Bender
 Fredrikson & Byron, P. A.
 1133 College Drive, Suite 1000
 Bismarck, ND 58501-1215
Cert. No. 7017 2400 0001 0889 9062



9590 9402 3634 7305 86

2. Article Number (Transfer from service label)

7017 2400 0001 0889 9062

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

[Handwritten Signature]

Agent

Addressee

B. Received by (Printed Name)

Karen Phillips

C. Date of Delivery

7/11/18

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below:

No

7 PU-18-217 Filed 07/13/2018 Pages: 2
 Return receipt – 7017-2400-0001-0889-9062
 USPS

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

- Signature Confirmation™
- Signature Confirmation Restricted Delivery

pu-18-217

USPS TRACKING

7

PU-18-217

Filed: 7/13/2018

Pages: 2

Return receipt - 7017-2400-0001-0889-9062



9590 02 3634

USPS

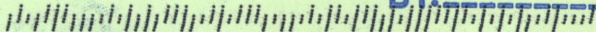
United States
Postal Service

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

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

RECEIVED
JUL 11 2018

BY: _____



ND PUBLIC SERVICE COMMISSION

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