

pu-18-345

**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.

Kristine Anderson  
 Corporate Attorney & Regulatory Affairs  
 Dakota Natural Gas, LLC  
 PO Box 68  
 Le Sueur, MN 56058  
**Cert. No. 7018 0680 0001 3737 6953**



9590 9402 3557 7

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee

X *Samantha Conrad*

B. Received by (*Printed Name*) C. Date of Delivery  
*Samantha Conrad* 12-21-18

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

28 PU-18-345 Filed 12/26/2018 Pages: 2  
 Return receipt – 7018-0680-0001-3737-6953  
 USPS

2. Article Number (*Transfer from service label*)

**7018 0680 0001 3737 6953**

- 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# 95015



9590 9402 355

28

PU-18-345

Filed: 12/26/2018 Pages: 2

Return receipt - 7018-0680-0001-3737-6953

First Class Mail  
Paid

USPS

United States  
Postal Service

DEC 26 2018  
NORTH DAKOTA  
PUBLIC SERVICE COMMISSION

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

