

7u-18-434

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.

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- Agent
- Addressee

B. Received by (Printed Name)

S. K. Mosbrink

C. Date of Delivery

7-28-17

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

Karl Liepitz
 Assistant General Counsel
 MDU Resources Group, Inc.
 PO Box 5650
 Bismarck, ND 58506-5650
 Cert. No. 7018 2290 0000 9934 4392



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 Return receipt - 7018-2290-0000-9934-4392
 USPS

2- Article Number (Transfer from service label)

7018 2290 0000 9934 4392

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

7u-18-434

USPS TRACKING #

First-Class Mail
Fees Paid
Post Net G-10

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Return receipt - 7018-2290-0000-9934-4392

USPS

United States
Postal Service

RECEIVED

AUG 1 2019

NORTH DAKOTA
PUBLIC SERVICE COMMISSION

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

