

PU-19-28

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.

Mollie Smith
Attorney for Ruso Wind Partners, LLC
Fredrickson & Byron, P. A.
200 South Sixth Street, Suite 4000
Minneapolis, MN 55402-1425
Cert. No. 7018 2290 0000 6607 8367

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

D. Folley

Agent

Addressee

B. Received by (Printed Name)

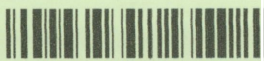
D. Folley

C. Date of Delivery

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below:

No



9590 9402 5199 912

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 Return receipt - 7018-2290-0000-6607-8367
 USPS

7018 2290 0000 6607 8367

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

- Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

USPS TRACKING #

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Return receipt - 7018-2290-0000-6607-8367

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

USPS

United States
Postal Service

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

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

RECEIVED
NOV 17 2019
NORTH DAKOTA
PUBLIC SERVICE COMMISSION

