

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. *118*

Bret Dublinske/Brandt Leonard
 Attorneys for Dakota Access LLC
 Fredrikson & Byron P.A.
 505 E Grand Avenue Suite 200
 Des Moines, IL 50309
 Cert. No. 7019 0700 0000 6174 3779
 Case No. PU-19-204 (Order)

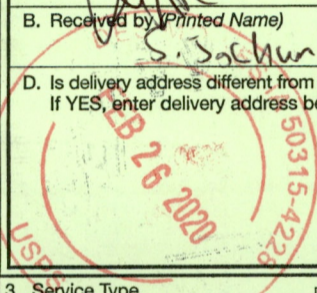
COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery

S. Sochen

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



3. Service Type Priority Mail Express®



9590 9402 5

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 Return receipt - 7019-0700-0000-6174-3779
 USPS

2. Article Number (Transfer from service label)

7019 0700 0000 6174 3779

Insured Mail Signature Confirmation
 Insured Mail Restricted Delivery (over \$500) Restricted Delivery

USPS TRACKING #



9590 9402

United States
Postal Service

R

RECEIVED

MAR

2

2020

NORTH DAKOTA
PUBLIC SERVICE COMMISSION

118 PU-19-204 Filed: 3/2/2020 Pages: 2
Return receipt - 7019-0700-0000-6174-3779

USPS

First-Class Mail
& Fees Paid
G-10

box

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

5-048099

