

PU-19-284

**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.


Casey Furey  
 Crowley Fleck PLLP  
 PO Box 2798  
 Bismarck, ND 58502-2798  
 Cert. No. 7018 0680 0001 3737 7240  
 Case No. PU-19-284



9590 9402 5199

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X   Agent  
 Addressee

B. Received by (Printed Name)

Al Self

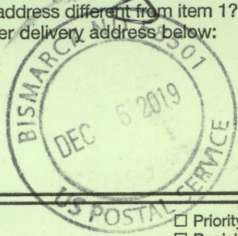
C. Date of Delivery

12-6-19

D. Is delivery address different from item 1?  Yes

If YES, enter delivery address below:

No



3. Service Type

Adult Signature

Priority Mail Express®

Registered Mail™

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 Return receipt - 7018-0680-0001-3737-7240  
 USPS

2. Article Number (Transfer from service label)

7018 0680 0001 3737 7240

Insured Mail

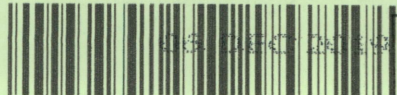
Insured Mail Restricted Delivery (over \$500)

Signature Confirmation

Restricted Delivery

USPS TRACKING#

DISPATCH NO. 535



09 DEC 2019

RECEIVED

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

9590 9402 5199 9122 8208 44

DEC 9 2019

United States  
Postal Service

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

NORTH DAKOTA  
PUBLIC SERVICE COMMISSION

*ND Public Service Commission  
Attn: Public Utilities Division*

*600 E Boulevard Ave Dept. 408*

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USPS

