

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.

Lawrence Bender
 Fredrikson & Byron, P. A.
 1133 College Drive, Suite 1000
 Bismarck, ND 58501-1215
 Cert. No. 7019 0700 0000 6174 4004
 Case No. PU-20-22



9590 9402 5222 9122 33

2. Article Number (Transfer from service label)

7019 0700 0000 6174 4004

COMPLETE THIS SECTION ON DELIVERY

A. Signature

 A. Nelson
 Agent Addressee

B. Received by (Printed Name)

A. Nelson

C. Date of Delivery

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

3. Service Type

 Priority Mail Express®

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Return receipt - 7019-0700-0000-6174-4004

USPS

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

Restricted Delivery

USPS TRACKING #



9590 9402

United States
Postal Service

21

PU-20-22

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Pages: 2

Return receipt - 7019-0700-0000-6174-4004

USPS

First Class Mail
Fees Paid

G-10

BOX*

RECEIVED
MAR 10 2020
BY

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

