

PU-20-41

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.

David B. Tibbals #08140
 Fredrikson & Byron, P.A.
 51 Broadway North, Suite 400
 Fargo, ND 58102
 Cert. No. 7020 1290 0001 6150 3250
 Case No. PU-20-41

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *USPS AGENT* Agent Addressee

B. Received by (Printed Name)
AGS

C. Date of Delivery
2-8-21

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



9590 9402 6024 0069 3922 07

3. Service Type Priority Mail Express®

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 Return receipt
 United States Postal Service

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

7020 1290 0001 6150 3250

USPS TRACKING #

FARGO ND 581



9590 9402 6

23

PU-20-41

Filed: 2/10/2021

Pages: 2

Return receipt

Mail
Fees Paid
G-10

United States Postal Service

United States
Postal Service

RECEIVED
FEB 10 2021

NORTH DAKOTA
PUBLIC SERVICE COMMISSION

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

