

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. A

NC 3, LLC
 44926 State Hwy 92
 Clearbrook, MN 56634
 Cert. No. 7019 2280 0000 0692 7757
 Case No. PU-20-96

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

NC3 LLC

- Agent
 Addressee

B. Received by (Printed Name)

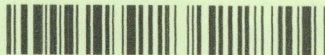
TE-RH2-C-19

C. Date of Delivery

10-13-20

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

3. Service Type



9590 9402 6143 0209 135

10 PU-20-96 Filed 10/19/2020 Pages: 2

Return receipt

United States Postal Service

7019 2280 0000 0692 7757

- 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#

SAINT PAUL MN 550

First-Class Mail
Fees Paid



10

PU-20-96

Filed: 10/19/2020 Pages: 2

Return receipt

G-10

9590 9402 6

United States Postal Service

United States
Postal Service

Box

RECEIVED
OCT 19 2020

NORTH DAKOTA
PUBLIC SERVICE COMMISS

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

