

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. Article Addressed to:

Lawrence Bender
 Fredrikson & Byron, P. A.
 1300 College Drive Suite 1000
 Bismarck, ND 58501-1215
 Case No. PU-20-161



9590 9402 5222 91

2. Article Number (Transfer from service label)

7019 1120 0002 3204 7061

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *A. Nelson* Agent Addressee

B. Received by (Printed Name)

A. Nelson

C. Date of Delivery

4/17/2020

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

3. Service Type

 Priority Mail Express®

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Return receipt

United States Postal Service

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

USPS TRACKING#



9590 9402 5222 9122 3376 08

First-Class Mail
Postage & Fees Paid

USPS
Permit No. G-10

RECEIVED
APR 20 2020

United States
Postal Service

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

PUBLIC SERVICE COMMISSION
NORTH DAKOTA
PUBLIC SERVICE COMMISSION
600 E BOULEVARD AVE DEPT 408
BISMARCK ND 58505-0480

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Pages: 2

Return receipt

United States Postal Service

TRACKING
BAR
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