

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-20-165



9590 9402 5222 912

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Return receipt

United States Postal Service

2. Article Number (Transfer from service label)

7019 1120 0002 3204 7078

COMPLETE THIS SECTION ON DELIVERY

A. Signature

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®

Collect on Delivery Restricted Delivery

Signature Confirmation™

Insured Mail

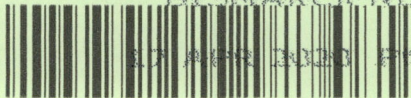
Signature Confirmation

Insured Mail Restricted Delivery (over \$500)

Restricted Delivery

USPS TRACKING #

BISMARCK ND 585



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

RECEIVED
APR 20 2020

9590 9402 5222 9122 3375 92

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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Return receipt

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