

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.

Lynn Boughey
 Attorney for Keith & Deanna Kessler
 PO Box 1202
 Mandan, ND 58554-1202
 Cert. No. 7020 1290 0001 6150 3298

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Terrie Gerhardt

Agent
 Addressee

B. Received by (Printed Name)

Terrie Gerhardt

C. Date of Delivery

2-9-21

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



9590 9402 6024 00

7020 1290 0001 6150 3298

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

- Signature Confirmation™
- Signature Confirmation Restricted Delivery

USPS TRACKING #

First-Class Mail
& Fees Paid
No. G-10



37

PU-20-194
Return receipt

Filed: 2/15/2021

Pages: 2

9590 9402

United States Postal Service

United States
Postal Service

s box*

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

RECEIVED
FEB 15 2021

NORTH DAKOTA
PUBLIC SERVICE COMMISSION

