

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.

David Willgohs
 401 Oakland Ave S
 Fargo, ND 58103
 Cert. No. 7020 1290 0001 6150 5827
 Case No. PU-20-201



9590 9402 6024 0069 3939

2.

7020 1290 0001 6150 5827

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

David Willgohs

Agent

Addressee

B. Received by (Printed Name)

David Willgohs

C. Date of Delivery

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

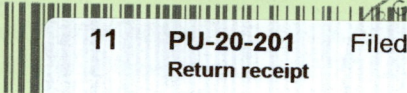
Insured Mail

Insured Mail Restricted Delivery (over \$500)

Signature Confirmation™

Signature Confirmation Restricted Delivery

USPS TRACKING #



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Return receipt

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

United States Postal Service

9590
United States Postal Service

+4® in this box®

RECEIVED
DEC 28 2020
NORTH DAKOTA
PUBLIC SERVICE COMMISSION

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

