

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.

Kristine A. Anderson
 Corporate Attorney (Minnesota) & Regulatory Affairs
 Dakota Natural Gas
 1900 Cardinal Lane
 Faribault, MN 55021
 Cert. No. 7019 0700 0000 6174 4790
 Case No. PU-20-245

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

[Handwritten Signature]

- Agent
- Addressee

B. Received by (Printed Name)

Jenna Wittman

C. Date of Delivery

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



9590 9402 6143 0209

7019 0700 0000 6174 4790

3. Service Type

Priority Mail Express®

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Return receipt

United States Postal Service

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

Domestic Return Receipt

USPS TRACKING #



23

PU-20-245
Return receipt

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Pages: 2

First-Class Mail

Fees Paid

G-10

United States Postal Service

9590 8402 6

United States
Postal Service

BOX*

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

OCT - 2 2020

NORTH DAKOTA
PUBLIC SERVICE COMMISS

RECEIVED

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