

**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.

Paul Sanderson  
 Evenson Sanderson PC  
 1100 College Drive, Suite 5  
 Bismarck, ND 58501  
 Cert. No. 7020 1290 0001 6150 5865  
 Case No. PU-20-379

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

x *Barbara Evenson*  Agent  
 Addressee

B. Received by (Printed Name)

BARB EVENSON

C. Date of Delivery

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



9590 9402 6024 0069 3939

3. Service Type  Priority Mail Express®  
 49 PU-20-379 Filed 12/28/2020 Pages: 2  
 Return receipt  
 United States Postal Service

2.   
 7020 1290 0001 6150 5865

- Collect on Delivery Restricted Delivery  Signature C.
- Insured Mail  Signature Coni.
- Insured Mail Restricted Delivery (over \$500)  Restricted Delivery

USPS TRACKING #



9590 9402

United States  
Postal Service

49

**PU-20-379**  
Return receipt

Filed: 12/28/2020 Pages: 2

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

United States Postal Service

his box\*

RECEIVE

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

