

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.

Article Addressed to:

Mollie Smith
 Fredrikson & Byron, P.A.
 200 South Sixth Street, Suite 4000
 Minneapolis, MN 55402-1425
 Cert. No. 7019 2280 0000 0692 7849
 Case No. PU-20-381



9590 9402 6143 0209 1399

7019 2280 0000 0692 7849

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

PK 204 C19

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

10/19/20

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

3. Service Type

Priority Mail Express®

20 PU-20-381 Filed 10/19/2020 Pages: 2

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#

MINNEAPOLIS MN 558



9590 9402 61

20

PU-20-381

Filed: 10/19/2020

Pages: 2

Postage Paid

Return receipt

10

United States Postal Service

United States
Postal Service

RECEIVED

OCT 19 2020

NORTH DAKOTA
PUBLIC SERVICE COMMISSION

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

