

**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.

Andrew Schriener  
 CenturyLink  
 200 South 5th Street, Room 2100  
 Minneapolis, MN 55402  
 Cert. No. 7020 1810 0000 0894 2486  
 Case NO. PU-20-386



9590 9402 6208 0220 8243 94

2. **7020 1810 0000 0894 2486**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**

*AS*

Agent

Addressee

B. Received by (*Printed Name*)

*AS 09 2007*

C. Date of Delivery

*8-9-21*

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

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)

- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

USPS TRACKING #



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PU-20-386

Filed: 8/12/2021

Pages: 2

Return receipt

United States Postal Service

9590 9402 6208 0220 8243 94

United States  
Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box•

RECEIVED

AUG 12 2021

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

NORTH DAKOTA

PUBLIC SERVICE COMMISSIONER

