

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.

Karl Liepitz
 Assistant General Counsel
 MDU Resources Group, Inc.
 PO Box 5650
 Bismarck, ND 58506-5650
 Cert. No. 7020 1290 0001 6150 6022
 Case No. PU-20-436



9590 9402 6024 0069 3949

7020 1290 0001 6150 6022

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X J-Vogel

Agent
 Addressee

B. Received by (Printed Name)

MF C-19

C. Date of Delivery

1-11-2021

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

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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 #



9590 9402 6

First-Class Mail
Fees Paid
G-10

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Return receipt

United States Postal Service

United States
Postal Service

RECEIVED
JAN 13 2021

NORTH DAKOTA
PUBLIC SERVICE COMMISSION

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

