

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.

Kristopher Twomey
 Law Office of Kristopher E. Twomey, P. C.
 1725 I Street NW Suite 300
 Washington, D.C. 20006
 Cert. No. 7020 1810 0000 0894 2141
 Case No. PU-21-168

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

[Handwritten Signature]

- Agent
 Addressee

B. Received by (Printed Name)

Carl Overby

C. Date of Delivery

6-15-21

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

3. Service Type

Priority Mail Express®



9590 9402 6611 1028

8 PU-21-168 Filed 06/23/2021 Pages: 2

Return receipt

United States Postal Service

2.

7020 1810 0000 0894 2141

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

USPS TRACKING #



9590 940

8

PU-21-168
Return receipt

Filed: 6/23/2021

Pages: 2

Class Mail
Postage & Fees Paid

No. G-10

United States Postal Service

**United States
Postal Service**

Sender: Please print your name, address, and ZIP code on this box*

R E C E I V E D

JUN 23 2021

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

NORTH DAKOTA
PUBLIC SERVICE COMMISSION

048099

