

Pu-21-452

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.

1. Article Addressed to:

Allison Mann
 Attorney
 MDU Resources Group, Inc.
 PO Box 5650
 Bismarck, ND 58506-5650
 Cert. No. 7020 1290 0000 1334 4482
 Case No. PU-21-452



9590 9402 6024 0069 4064 54

2

7020 1290 0000 1334 4482

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X J. Vogel

- Agent
- Addressee

B. Received by (Printed Name)

MS C-19

C. Date of Delivery

4-4-22

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

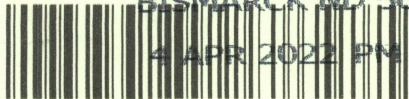
9 PU-21-452 Filed 04/06/2022 Pages: 4
 Return receipts (2)
 United States Postal Service

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
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

USPS TRACKING #

BISMARCK ND 585



4 APR 2022 PM 1 L



RECEIVED

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

9590 9402 6024 0069 4064 54

APR - 6 2022

United States
Postal Service

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

NORTH DAKOTA

PUBLIC SERVICE COMMISSION

ND Public Service Commission
Attn: Public Utilities Division
600 E Boulevard Ave. Dept. 408

9

PU-21-452

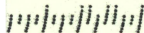
Filed: 4/6/2022

Pages: 4

05-0480

Return receipts (2)

United States Postal Service



PU-21-472

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.

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *J. Vogel*

- Agent
- Addressee

B. Received by (*Printed Name*)

JK C-19

C. Date of Delivery

4-4-22

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

Travis Jacobson
 Director of Regulatory Affairs
 Montana-Dakota Utilities Co.
 400 North Fourth Street
 Bismarck, ND 58501
 Cert. No. 7020 1290 0000 1334 4475
 Case No. PU-21-452



9590 9402 6024 0069 4064 47

7020 1290 0000 1334 4475

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
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

USPS TRACKING#
BISMARCK ND 585



4 APR 2022 PM 1 L

RECEIVED

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

APR - 6 2022

9590 9402 6024 0069 4064 47

United States
Postal Service

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

NORTH DAKOTA
PUBLIC SERVICE COMMISSION

ND Public Service Commission
Attn: Public Utilities Division
600 E Boulevard Ave. Dept. 408

9

PU-21-452

Filed: 4/6/2022

Pages: 4

05-0480

Return receipts (2)

United States Postal Service

