

**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:

Thomas Campbell  
 Olsen Thielen  
 2675 Long Lake Road  
 St. Paul, MN 55113-1117  
 Cert. No. 7021 2720 0000 4438 6897  
 Case No. PU-22-40



9590 9402 7805 2152 9936 92

2. Article No.:

7021 2720 0000 4438 6897

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

L. Spermbaur

 Agent Addressee

B. Received by (Printed Name)

L. Spermbaur

C. Date of Delivery

2-27-23

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

 12 PU-22-40 Filed 03/03/2023 Pages: 2  
 Return receipt  
 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)

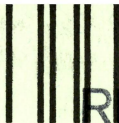
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

USPS TRACKING#

SAINT PAUL MN 550



27 FEB 2023 PM 1 L



RECEIVED

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

9590 9402 7805 2152 9936 92

MAR - 3 2023

United States  
Postal Service

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

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

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PU-22-40

Filed: 3/3/2023

Pages: 2

Return receipt

United States Postal Service