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:

Steven Leibel David Knoll Knoll Leibel I I P PO Box 858 Bismarck, ND 58502-0858



9590 9402 7987 2305 9071 11

- 2. Article Number (Transfer from service label)
- 7020 1290 0001 6150 9634

COMPLETE THIS SECTION ON DELIVERY

A. Signature Addres : Received by (Printed Name) C. Date of Delivery ☐ Yes D. Is delivery address different from item 1? If YES, enter delivery address below: □ No PU-22-391 383 Filed: 9/5/2023 Pages: 4

Return Receipts (2)

United States Postal Service

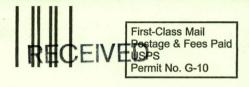
3. Service Type

(over \$500)

- ☐ 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

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

USPS TRACKING#



9590 9402 7987 2305 9071 11

SEP - 5 2023

United States Postal Service Sender: Please print your name, address, and ZIP+4° in this box°
NORTH DAKOTA
ND Publip SERMOR DENIMISSION
Attn: Public Utilities Division
600 E. Boulevard Ave. Dept. 408
Bismarck, ND 58505-0480

383 PU-22-391

Filed: 9/5/2023

Pages: 4

Return Receipts (2)

14/14/1

U-22-391

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.
- Article Addressed to:

Randall J. Bakke Bradley N. Wiederholt Bakke Grinolds Wiederholt PO Box 4247 Bismarck, ND 58502-4247



9590 9402 7987 2305 9071 04

2. Article Number (Transfer from service label) 7020 1290 0001 6150 9627

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Addressee B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? If YES, enter delivery address below: П 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

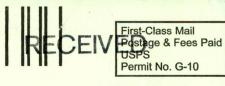
Delivery □ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt



9590 9402 7987 2305 9071 04



SEP - 5 2023

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

Bismarck, ND 58505-0480