

PU-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.

Lawrence Bender
 Fredrikson & Byron, P.A.
 1133 College Drive Suite 1000
 Bismarck ND 58501-1215
 Cert. No. 589 0710 5270 1582 7537 56
 Case No. PU-22-391



9590 9402 8147 3030 8109 40

2. Article Number (Transfer from service label)

9589 0710 5270 1582 7537 56

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

[Handwritten Signature]

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Karen Phillips

C. Date of Delivery

12/1/2

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ 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

USPS TRACKING #



DEC 2023 PM

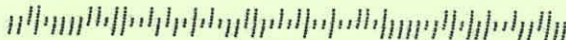
9590 9402 8147 3030 8109 40

United States
Postal Service

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

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

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



PU-22-391

ER: 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:

Derek Braaten
Braaten Law Firm
109 N 4th Street, Suite 100
Bismarck, ND 58501
Cert. No. 9589 0710 5270 1582 7538 31
Case No. PU-22-391



9590 9402 8147 3030 8108 65

2. Article Number (Transfer from service label)

9589 0710 5270 1582 7538 31

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Lisa Rask

☒ Agent

☐ Addressee

B. Received by (Printed Name)

LISA RASK

C. Date of Delivery

12/1/23

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ 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™

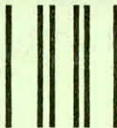
☐ Signature Confirmation Restricted Delivery

USPS TRACKING #



BISMARCK ND 585

1 DEC 2023 PM 1 L



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

9590 9402 8147 3030 8108 65

United States
Postal Service

RECEIVED

DEC - 4 2023

• 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

