

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.

Kevin Paris
LUNA Michener 3 North Dakota
St. Paul, MN
Cert. No. 702 330 000 7993 4640
Case No. PU-22-391



9590 9402 7987 2305 9058 65

2. Article Number (Transfer from service label)

7022 3330 0000 7993 4640

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Sara Nohrentberg

C. Date of Delivery

2/14/24

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

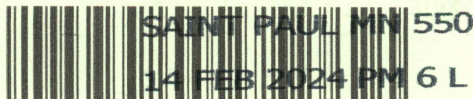
☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

USPS TRACKING #



SAINT PAUL MN 550
14 FEB 2024 PM 6 L



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

9590 9402 7987 2305 9058 65

United States
Postal Service

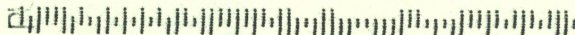
RECEIVED

FEB 20 2024

NORTH DAKOTA
PUBLIC SERVICE COMMISSION

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

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



PU-22-391

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1. Article Addressed to:

Brian E. Jorde
Domina Law Group
2425 S. 144th St.
Omaha, NE 68144
Cert. No. 7022 3330 0000 7993 4633
Case No. PU-22-391



9590 9402 7987 2305 9058 58

2. Article Number (Transfer from service label)

7022 3330 0000 7993 4633

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Bm*

- ☒ Agent
☐ Addressee

B. Received by (Printed Name)

Bryce Tsavlis

C. Date of Delivery

2/13/24

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

3. Service Type

- | | |
|--|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input checked="" type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | |
| <input type="checkbox"/> Insured Mail | |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) | |

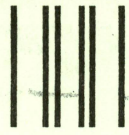
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Domestic Return Receipt

USPS TRACKING #



9590 9402 7987 2305 9058 58



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

United States
Postal Service

RECEIVED

FEB 20 2024

NORTH DAKOTA
PUBLIC SERVICE COMMISSION

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ND Public Service Commission
PUD Division
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Bismarck, ND 58505-0480