

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.

Steven Leibel
David Knoll
Knoll Leibel LLP
PO Box 858
Bismarck, ND 58502-0858
Cert. No. 9589 0710 5270 1582 7552 79
Case No. PU-22-391



9590 9402 8147 3030 8011 46

2. Article Number (Transfer from service label)

9589 0710 5270 1582 7552 79

COMPLETE THIS SECTION ON DELIVERY

A. Signature

* Rosanne Gorden

- ☒ Agent
- ☐ Addressee

B. Received by (Printed Name)

Rosanne Gorden

C. Date of Delivery

3-22-2024

D. Is delivery address different from item 1?

- ☐ Yes
- ☐ No

If YES, enter delivery address below:

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)

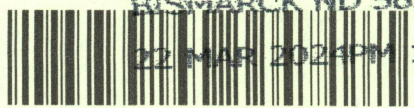
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

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

Domestic Return Receipt

USPS TRACKING#

BISMARCK ND 585



22 MAR 2024 PM 1 L



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

9590 9402 8147 3030 8011 46

United States
Postal Service

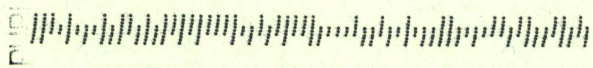
• Sender: Please print your name, address, and ZIP+4® in this box•

RECEIVED

MAR 25 2024

NORTH DAKOTA
PUBLIC SERVICE COMMISSION

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



PU-22-391

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Patrick Zomer
Moss & Barnett
150 S 5th Street, Suite 1200
Minneapolis, MN 55402
Cert. No. 9589 0710 5270 1582 7553 47
Case No. PU-22-391



9590 9402 8147 3030 8011 77

2. Article Number (Transfer from service label)

9589 0710 5270 1582 7553 47

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Awo 207

☒ Agent
☐ Addressee

B. Received by (Printed Name)

Moss + Barnett

C. Date of Delivery

03/20/24

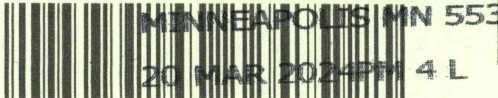
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

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

USPS TRACKING#



9590 9402 8147 3030 8011 77

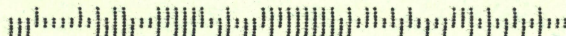
**United States
Postal Service**

• 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

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USPS
Permit No. G-10

5-060199



Pu-22-391

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Randall J. Bakke
Bradley N. Wiederholt
Bakke Grinolds Wiederholt
PO Box 4247
Bismarck, ND 58502-4247
Cert. No. 9589 0710 5270 1582 7552 62
Case No. PU-22-391



9590 9402 8147 3030 8011 53

2. Article Number (Transfer from service label)
9589 0710 5270 1582 7552 62

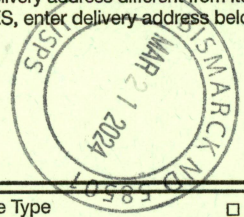
PS Form 3811, July 2010 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Alex P.* ☒ Agent ☐ Addressee

B. Received by (Printed Name) *ACX* C. Date of Delivery *3-21*

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

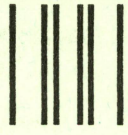


3. Service Type
- ☐ Adult Signature
 - ☐ Adult Signature Restricted Delivery
 - ☒ Certified Mail®
 - ☐ Certified Mail Restricted Delivery
 - ☐ Collect on Delivery
 - ☐ Collect on Delivery Restricted Delivery
 - ☐ Insured Mail
 - ☐ Insured Mail Restricted Delivery (over \$500)
 - ☐ Priority Mail Express®
 - ☐ Registered Mail™
 - ☐ Registered Mail Restricted Delivery
 - ☐ Signature Confirmation™
 - ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

BISMARCK ND 585

USPS TRACKING#
21 MAR 2024PM 1 L



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

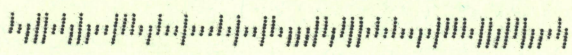
9590 9402 8147 3030 8011 53

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MAR 25 2024
NORTH DAKOTA
PUBLIC SERVICE COMMISSION

United States
Postal Service

• 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



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- Attach this card to the back of the mailpiece, or on the front if space permits.

Bret Dublinske
Fredrikson & Byron, P.A.
111 E Grand Avenue, Suite 301
Des Moines, IA 50309-1884
Cert. No. 9589 0710 5270 1582 7553 09
Case No. PU-22-391



9590 9402 8147 3030 8011 15

2. Article Number (Transfer from service label)

9589 0710 5270 1582 7553 09

COMPLETE THIS SECTION ON DELIVERY

A. Signature



☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

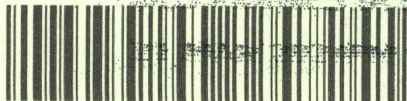
☐ Signature Confirmation™

☐ Signature Confirmation
Restricted Delivery

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

Domestic Return Receipt

USPS TRACKING#



9590 9402 8147 3030 8011 15

**United States
Postal Service**

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

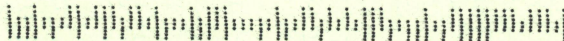
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1. Article Addressed to:

Brant M. Leonard
Fredrikson & Byron, P. A.
111 E Grand Avenue, Suite 301
Des Moines, IA 50309-1884
Cert. No. 9589 0710 5270 1582 7552 55
Case No. PU-22-391



9590 9402 8147 3030 8006 37

2. Article Number (Transfer from service label)

9589 0710 5270 1582 7552 55

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

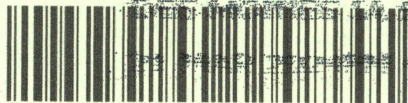
If YES, enter delivery address below: ☐ No

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

Domestic Return Receipt

USPS TRACKING#



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**United States
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