

7u-23-86

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.

Mollie Smith
 Fredrikson & Byron, P. A.
 200 South Sixth Street, Suite 4000
 Minneapolis, MN 55402-1425
 Cert. No. 7021 2720 0000 4438 7382
 Case No. PU-23-86



9590 9402 7805 2152 9856 11

2. Article Number (Transfer from service label)

7021 2720 0000 4438 7382

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X LPM-mailroom

- Agent
- Addressee

B. Received by (Printed Name)

N. Dahl

C. Date of Delivery

5/2/23

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

29 PU-23-86 Filed 05/08/2023 Pages: 2
Return receipt
United States Postal Service

3. Service Type

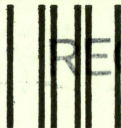
- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

USPS TRACKING #



MINNEAPOLIS MN 553

2 MAY 2023 PM 6 L



RECEIVED

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

MAY - 8 2023

9590 9402 7805 2152 9856 11

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

29

PU-23-86

Filed: 5/8/2023

Pages: 2

Return receipt

United States Postal Service