

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:

Dwight D. Gradin and Denise Gradin
 76 32nd Ave. SW
 Underwood, ND 58576-9633



9590 9402 7877 2234 0968 43

2. Article Number (Transfer from service label)

7022 3330 0000 7993 6095

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
 Chris Gradin

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#



9590 9402 7877 2234 0968 43



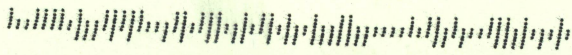
First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

OCT - 2 2023

United States
 Postal Service

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

NORTH CAROLINA
 PUBLIC SERVICE COMMISSION
 ND Public Service Commission
 600 E Boulevard Ave. Dept. 408
 Bismarck, ND 58505-0480



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:

Robert C. Mann
 105 Dena St.
 Plentywood, MT 59254-2115



9590 9402 7877 2234 0968 36

2. Article Number (Transfer from service label)

7022 3330 0000 7993 6101

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Robert C Mann*

Agent

Addressee

B. Received by (Printed Name)

ROBERT MANN

C. Date of Delivery

9.27.23

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

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

Domestic Return Receipt

USPS TRACKING#



9590 9402 7877 2234 0968 36



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

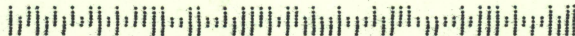
OCT - 2 2023

United States Postal Service

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

PUBLIC SERVICE COMMISSION

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



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:

Glenda G. Scholl
 3579 8th St. SW
 Washburn, ND 58577



9590 9402 7877 2234 0968 29

2. Article Number (Transfer from service label)

7022 3330 0000 7993 6118

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Glenda G. Scholl* Agent
 Addressee

B. Received by (Printed Name)

Glenda Scholl

C. Date of Delivery

9/23/23

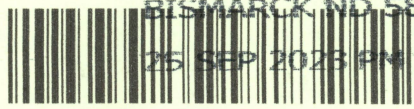
D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

3. Service Type

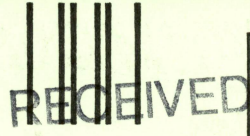
- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted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

USPS TRACKING#



9590 9402 7877 2234 0968 29

BISMARCK ND 585
 25 SEP 2023 PM 1 L



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

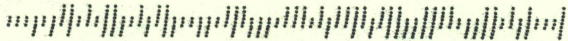
SEP 27 2023

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
 600 E Boulevard Ave. Dept. 408
 Bismarck, ND 58505-0480



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:

Micha M. Thyberg
 2912 St. SW
 Washburn, ND 58577



9590 9402 7877 2234 0968 12

2. Article Number (Transfer from service label)

7022 3330 0000 7993 6125

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Michael Thyberg Addressee

B. Received by (Printed Name) C. Date of Delivery
 MICHAEL THYBERG 9-25-23

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

Domestic Return Receipt

USPS TRACKING#



9590 9402 7877 2234 0968 12

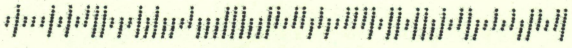


First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

SEP 27 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
 600 E Boulevard Ave. Dept. 408
 Bismarck, ND 58505-0480



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:

Margaret E. Tollerud, as Trustee
 of the Margaret E. Tollerud Revocable Trust
 Revocable Trust Dated 02-19-10
 4345 Oakview Ln. N
 Plymouth, MN 55442-2776



9590 9402 7877 2234 0967 99

2. Article Number (Transfer from service label)

7022 3330 0000 7993 6149

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Margaret Tollerud* 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

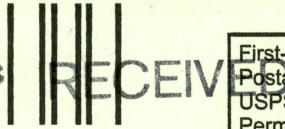
Domestic Return Receipt

USPS TRACKING#



MINNEAPOLIS MN 553
 25 SEP 2023 PM 5 L

9590 9402 7877 2234 0967 99



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

SEP 29 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
 600 E Boulevard Ave. Dept. 408
 Bismarck, ND 58505-0480



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:

Carol Sauer, Life Estate
 1203 Billings Dr.
 Bismarck, ND 58504-6418



9590 9402 7877 2234 0967 82

2. Article Number (Transfer from service label)

7022 3330 0000 7993 6156

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Carol Sauer*

Agent

Addressee

B. Received by (Printed Name)

CAROL SAUER

C. Date of Delivery

9-29-23

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

Domestic Return Receipt

USPS TRACKING#



9590 9402 7877 2234 0967 82



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

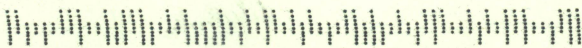
OCT - 2 2023

United States Postal Service

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

PUBLIC SERVICE COMMISSION

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



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:

Mark Swanson and Pamela L. Hopkins
 1836 E Broadway Blvd #124-107
 Tucson, AZ 85719-5966



9590 9402 7877 2234 0967 75

2. Article Number (Transfer from service label)

7022 3330 0000 7993 6163

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *E. Hopkins*

Agent

Addressee

B. Received by (Printed Name)

Francisco

C. Date of Delivery

9/28/23

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

Domestic Return Receipt

USPS TRACKING#



9590 9402 7877 2234 0967 75

RECEIVED

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

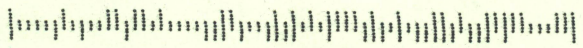
SEP 28 2023

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
 600 E Boulevard Ave. Dept. 408
 Bismarck, ND 58505-0480

048055

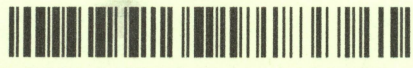


SENDER: COMPLETE THIS SECTION

- 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:

Stephen P. Swanson
 3312 11th St. SE
 Minot, ND 58701



9590 9402 7877 2234 0967 68

2. Article Number (Transfer from service label)

7022 3330 0000 7993 6170

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

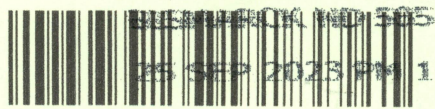
B. Received by (Printed Name) C. Date of Delivery

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 7877 2234 0967 68



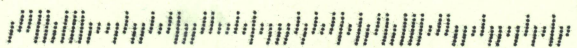
First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

SEP 27 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
 600 E Boulevard Ave. Dept. 408
 Bismarck, ND 58505-0480



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:

Forrest W. Ecklund and Alyce F. Ecklund
 1415 Sharloh Loop Apt. 6
 Bismarck, ND 58501-7809



9590 9402 7877 2234 0967 51

2. Article Number (Transfer from service label)

7022 3330 0000 7993 6187

COMPLETE THIS SECTION ON DELIVERY

A. Signature

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

9-23-23

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™
- Signature Restricted Delivery
- Signature Restricted Delivery

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

Domestic Return Receipt

USPS TRACKING#



9590 9402 7877 2234 0967 51

RECEIVED

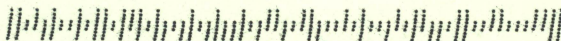
First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

SEP 26 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
 600 E Boulevard Ave. Dept. 408
 Bismarck, ND 58505-0480



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:

Ronald B. Hegvik and Kay M. Hegvik,
 Life Estate
 512 Wellington Ct.
 West Fargo, ND 58078-4237



9590 9402 7877 2234 0967 44

2. Article Number (Transfer from service label)

7022 3330 0000 7993 6194

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee

B. Received by (Printed Name)
 C. Date of Delivery
 09/25/23

D. Is delivery address different from item 1?
 If YES, enter delivery address below:
 Yes
 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 7877 2234 0967 44



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

SEP 25 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
 600 E Boulevard Ave. Dept. 408
 Bismarck, ND 58505-0480

048099



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:

Ryan Peterson and Kristin Peterson
3675 8th St SW
Washburn, ND 58577-9518



9590 9402 7877 2234 0967 37

2. Article Number (Transfer from service label)

7022 3330 0000 7993 6200

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) *mail King* C. Date of Delivery *9/27/20*

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#



9590 9402 7877 2234 0967 37



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

SEP 27 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
600 E Boulevard Ave. Dept. 408
Bismarck, ND 58505-0480

