

PU-23-367

SENDER: COMPLETE THIS SECTION

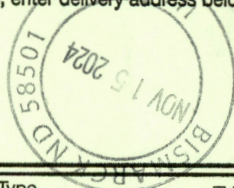
- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
 G. SWANSON 11-15-24

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



1. David Tschider
 Tschider & Smith Law Firm
 PO Box 754
 Bismarck, ND 58501-0754
 Cert. No. 9589 0710 5270 0129 6618 68
 Case No. PU-23-367



9590 9402 8606 3244 9338 08

2. Article Number (Transfer from service label)

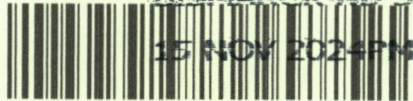
9589 0710 5270 0129 6618 68

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 #
 RISMARCK ND 585



9590 9402 8606 3244 9338 08

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

United States Postal Service

RECEIVED

NOV 20 2024

NORTH DAKOTA PUBLIC SERVICE COMMISSION

• 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

