

PU-24-87

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:

Smith
 Fr... & Byron, P.A.
 60 South Sixth Street, Suite 1500
 Minneapolis, MN 55402-4400
 Cert. No. 9589 0710 5270 2139 5696 77
 Case No. PU-24-87



9590 9402 8970 4064 9744 93

2. Article Number (Transfer from service label)

9589 0710 5270 2139 5696 77

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

5-27

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

101 PU-24-87 Filed 05/30/2025 Pages: 1
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

Domestic Return Receipt

USPS TRACKING#



MINNEAPOLIS MN 553
27 MAY 2025PM 4 L

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

9590 9402 8970 4064 9744 93

United States Postal Service

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

RECEIVED

MAY 30 2025

NORTH DAKOTA PUBLIC SERVICE COMMISSION

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

