

**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:

Derrick Braaten  
 Braaten Law Firm  
 109 N. 4th St. Suite 100  
 Bismarck, ND 58501



9590 9402 8606 3244 8873 09

2. Article Number (Transfer from service label)

9589 0710 5270 0129 6573 35

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *[Handwritten 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

28 RC-24-244 Filed 09/05/2024 Pages: 1  
 Return Receipt (1)  
 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 Confirm
- Signature Confirm Restricted Delivery

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

Domestic Return R

USPS TRACKING #



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

9590 9402 8606 3244 8873 09

United States Postal Service

RECEIVED  
SEP 5 2024

NORTH DAKOTA PUBLIC SERVICE COMMISSION

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

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