

PU-24-321

**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:

Mollie Smith  
 Fredrikson & Byron, P. A.  
 60 South Sixth Street, Suite 1500  
 Minneapolis, MN 55402-1425  
 Cert. No. 9589 0710 5270 0129 6581 10  
 Case No. PU-24-321

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X *RAM 8-29-24*  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

9 PU-24-321 Filed 09/03/2024 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



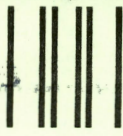
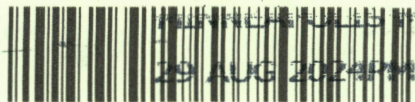
9590 9402 8849 4005 9626 58

9589 0710 5270 0129 6581 10

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

Domestic Return Receipt

**USPS TRACKING#**



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

9590 9402 8849 4005 9626 58

**United States Postal Service**

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

RECEIVED

SEP 3 2024

NORTH DAKOTA PUBLIC SERVICE COMMISSION

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

