

PU-24-351

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 55402-4400
 Cert. No. 9589 0710 5270 0129 6623 53
 Case No. PU-24-351



9590 9402 8809 4005 0831 26

2. Article Number (Transfer from service label)

9589 0710 5270 0129 6623 53

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

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

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 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

USPS TRACKING #



9590 9402 8809 4005 0831 26



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

**United States
 Postal Service**

• 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

RECEIVED

FEB 14 2025

NORTH DAKOTA
 PUBLIC SERVICE COMMISSION