

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:

Travis Jacobson
 Director Regulatory Affairs
 Montana-Dakota Utilities Co.
 400 North 4th Street
 Bismarck, ND 58501
 Cert. No. 9589 0710 5270 0129 6583 87
 Case No. PU-23-321



9590 9402 8849 4005 9632 28

9589 0710 5270 0129 6583 87

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x [Signature]

- Agent
- Addressee

B. Received by (Printed Name)

Benton

C. Date of Delivery

6-28-24

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

21 PU-23-321 Filed 05/30/2024 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

USPS TRACKING#



9590 9402 8849 4005 9632 28



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

MAY 30 2024

NORTH DAKOTA PUBLIC SERVICE COMMISSION

