

PU-24310

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. Addressee

Jason Bentz
 Co-General Manager/CEO
 KEM Electric Cooperative
 PO Box 790
 Linton, ND 58552-0790
 Cert. No. 9589 0710 5270 1582 9557 81
 Case No. PU-24-310



9590 9402 8147 3030 8014 36

2. Article Number (Transfer from service label)

9589 0710 5270 1582 9557 81

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
Denise Ketterling

B. Received by (Printed Name) C. Date of Delivery
Denise Ketterling 9-16-24

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

9 PU-24-310 Filed 09/19/2024 Pages: 3
 Return Receipt (3)

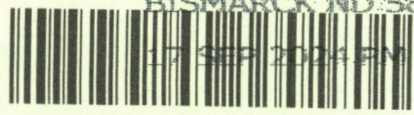
United States Postal Service

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

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 8147 3030 8014 36

United States Postal Service

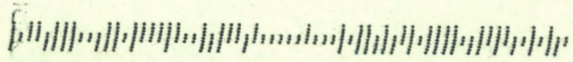
RECEIVED

SEP 19 2024

NORTH DAKOTA

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



PU-24-310

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.
 Travis Kupper
 Co-General Manager/CEO
 KEM Electric Cooperative
 PO Box 790
 Linton, ND 58552-0790
 Cert. No. 9589 0710 5270 1582 7557 67
 Case No. PU-24-310



9590 9402 8147 3030 8021 67

2. Article Number (Transfer from service label)
 9589 0710 5270 1582 7557 67

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X Denise Ketterling Agent Addressee

B. Received by (Printed Name) C. Date of Delivery
 Denise Ketterling 9-16-24

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

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

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

USPS TRACKING#



9590 9402 8147 3030 8021 67



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

United States Postal Service

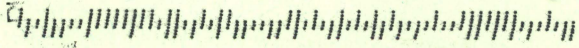
RECEIVED

SEP 19 2024

NORTH DAKOTA PUBLIC SERVICE COMMISSION

• 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



PU-24-310

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 Johnson
 Director Regulatory Affairs
 Montana Dakota Utilities Co.
 400 North 7th Street
 Bismarck, ND 58501
 Cert. No. 589 0710 5270 1582 7557 50
 Case No. PU-24-310



9590 9402 8147 3030 8021 74

2. Article Number (Transfer from service label)

9589 0710 5270 1582 7557 50

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X
 Agent
 Addressee

B. Received by (Printed Name)
 C. Date of Delivery

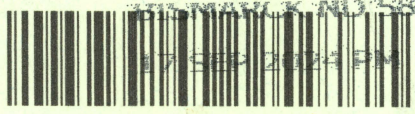
D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

- 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

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

Domestic Return Receipt

USPS TRACKING#



9590 9402 8147 3030 8021 74



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

United States Postal Service

RECEIVED

SEP 19 2024

NORTH DAKOTA SERVICE COMMISSION

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

