

PU-24-322 & 24-323

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.

Mike Kilgore - CEO
 Nemont Telephone Cooperative
 PO Box 600
 Scobey, MT 59263
 Cert No. 9589 0710 5270 0129 6618 06
 Case Nos PU-24-322 & 24-323

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Brenda Anderson* Agent Addressee

B. Received by (Printed Name) *Brenda Anderson* C. Date of Delivery *11/21/2024*

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

- 16 PU-24-322 Filed 11/25/2024 Pages: 1
Return Receipt
United States Postal Service
- 14 PU-24-323 Filed 11/25/2024 Pages: 1
Return Receipt
United States Postal Service



9590 9402 8606 3244 9333 34

2. Article Number (Transfer from service label)

9589 0710 5270 0129 6618 06

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 8606 3244 9333 34



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

NOV 25 2024

NORTH DAKOTA PUBLIC SERVICE COMMISSION

