

PU-24-330

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 1582 7557 98
 Case No. PU-24-330



9590 9402 8147 3030 8014 29

2. Article Number (Transfer from service label)

9589 0710 5270 1582 7557 98

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Brent Down*

- Agent
- Addressee

B. Received by (Printed Name)

Brent Down

C. Date of Delivery

10-7-24

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

10 PU-24-330 Filed 10/09/2024 Pages: 2
Return Receipt (2)

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

Domestic Return Receipt

USPS TRACKING#



9590 9402 8147 3030 8014 29

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

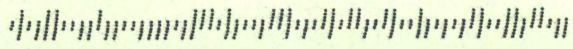
United States Postal Service

RECEIVED
 OCT 9 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

505-060208



PU-24-330

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1. Article Addressed to:

Mark Kinzler
 General Manager
 Dakota Vailey Electric Cooperative, Inc.
 7296 Highway 281
 Edgeley, ND 58433
 Cert. No. 9589 0710 5270 1582 7558 04
 Case No. PU-24-330



9590 9402 8147 3030 8014 12

2. Article Number (Transfer from service label)

9589 0710 5270 1582 7558 04

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Kelly Wald

- Agent
- Addressee

B. Received by (Printed Name)

Kelly Wald

C. Date of Delivery

10-7-24

- 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 8014 12



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

United States Postal Service

RECEIVED

OCT 9 2024

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 Bismarck, ND 58505-0480

