

PU-25-261

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
 VP of Regulatory Affairs
 Montana-Dakota Utilities Co.
 400 North 4th Street
 Bismarck, ND 58501
 Cert. No. 9589 0710 5270 1777 9869 14
 Case No. PU-25-261



9590 9402 9511 5069 7912 50

2. Article Number (Transfer from service label)

9589 0710 5270 1777 9869 14

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 X *Travis Jacobson* Addressee

B. Received by (Printed Name) C. Date of Delivery
Travis Jacobson 10/27/2025

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

9 PU-25-261 Filed 10/29/2025 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

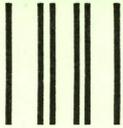
Domestic Return Receipt

USPS TRACKING#

BISMARCK ND 585



28 OCT 2025 AM 1 L



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

9590 9402 9511 5069 7912 50

United States Postal Service

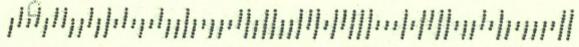
• Sender: Please print your name, address, and ZIP+4® in this box •

ND Public Service Commission
 Attn: Public Utilities Division
 600 E Boulevard Ave. Dept. 408
 Bismarck, ND 58505-0480

RECEIVED

OCT 29 2025

NORTH DAKOTA PUBLIC SERVICE COMMISSION



PU-25-241

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

- 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.

A. Signature
 * *Jason Bentz*
 Agent
 Addressee

B. Received by (Printed Name) *Jason Bentz*
 C. Date of Delivery *10/29/25*

1. Jason Bentz
 Co-General Manager/CEO
 KEM Electric Cooperative
 PO Box 790
 Linton, ND 58552-0790
 Cert. No. 9589 0710 5270 1777 9869 38
 Case No. PU-25-261

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



9590 9402 8005 2305 4429 28

2. Article Number (Transfer from service label)
9589 0710 5270 1777 9869 38

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 #



BISMARCK ND 585
 28 OCT 2025 AM 11 L



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

9590 9402 8005 2305 4429 28

United States Postal Service

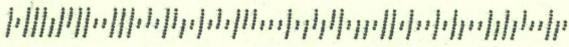
• Sender: Please print your name, address, and ZIP+4® in this box •

RECEIVED

OCT 29 2025

NORTH DAKOTA SERVICE COMMISSION

ND Public Service Commission
Attn: Public Utilities Division
600 E Boulevard Ave. Dept. 408
Bismarck, ND 58505-0480



PU-25-261

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1. Article Addressed to:

Travis Kupper
 Co-General Manager/CEO
 KEM Electric Cooperative
 PO Box 790
 Linton, ND 58552-0790
 Cert. No. 9589 0710 5270 1777 9869 21
 Case No. PU-25-261



9590 9402 9511 5069 7912 43

2. Article Number (Transfer from service label)

9589 0710 5270 1777 9869 21

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Travis Kupper
 B. Received by (Printed Name)
Denise Kupper

- Agent
- Addressee

C. Date of Delivery

10-27-25

- 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 #



BISMARCK ND 585
 28 OCT 2025 AM 1 L

9590 9402 9511 5069 7912 43

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

United States Postal Service

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ND Public Service Commission
Attn: Public Utilities Division
600 E Boulevard Ave. Dept. 408
Bismarck, ND 58505-0480

RECEIVED

OCT 29 2025

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