

U-13-840

SECTION ON DELIVERY

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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.

X *Patrick Jensen*

- Agent
- Addressee

B. Received by (Printed Name)
Patrick Jensen

C. Date of Delivery
2-26-14

1.

DEAN PAWLOWSKI
OTTER TAIL POWER COMPANY
215 SOUTH CASCADE STREET
FERGUS FALLS, MN 56538-0496

- Address different from item 1? Yes
- Delivery address below: No

- Certified Mail® Priority Mail Express™
- Registered Return Receipt for Merchandise
- Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
(Transfer from service label)

7013 2630 0001 2317 0583