

**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. *F*

Bruce Gerhardson, Legal Department  
 Otter Tail Power Company  
 215 C. Cascade Street  
 Fergus Falls, MN 56538  
**Cert. No. 7015 0920 0001 6791 8695**  
**PU-15-517**



9590 9401 0059 5071 4553 72

2. Article Number (Transfer from service label)

**Cert. No. 7015 0920 0001 6791 8695**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X** *Emily Kucera*

- Agent
- Addressee

B. Received by (Printed Name)

*Emily Kucera*

C. Date of Delivery

*9-8-15*

D. Is delivery address different from item 1?  Yes

If YES, enter delivery address below:  No

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 Return receipt – 7015-0920-0001-6791-8695  
 USPS

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
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

UNITED STATES POSTAL SERVICE

09 SEP

12

PU-15-517

Filed: 9/11/2015

Pages: 2

Return receipt - 7015-0920-0001-6791-8695

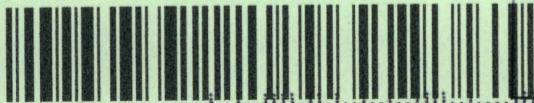
USPS

• Sender: Please p

N. D. Public Service Commission  
600 E. Boulevard Avenue Dept. 408  
Bismarck, ND 58505-0480

RECEIVED  
SEP 11 2015  
NORTH DAKOTA  
PUBLIC SERVICE COMMISSION

USPS TRACKING#



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