

pu-17-238

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

Cary Stephenson
 Associate General Counsel
 Otter Tail Power Company
 215 S. Cascade Street
 Fergus Falls, MN 56538-0496
Cert. Mail 7017 1070 0000 1507 6835

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Cary Mee*

- Agent
- Addressee

B. Received by (Printed Name)

Cary Mee

C. Date of Delivery

10/10/17

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



9590 9402 3012 7124

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 Return receipt - 7017-1070-0000-1507-6835
 USPS

2. Article Number (Transfer from service label)

7017 1070 0000 1507 6835

- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

pu-17-238

USPS TRACKING #

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

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Return receipt - 7017-1070-0000-1507-6835

USPS

ZIP+4® in this box*

Uni
Pos

RECEIVED

OCT 13 2017

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

NORTH DAKOTA
PUBLIC SERVICE COMMISSION

