

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.

Carey Stephenson
 Associate General Counsel
 Otter Tail Power Company
 PO Box 496
 Fergus Falls, MN 56538-0496
 Cert. No. 7019 0700 0000 6174 3588
 Case No. PU-19-387

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Russ Beske* Agent Addressee

B. Received by (Printed Name)
Beske

C. Date of Delivery
1-27-20

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

3. Service Type Priority Mail Express®



9590 9402 5222 912

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 Return receipt – 7019-0700-0000-6174-3588
 USPS

2. 7019 0700 0000 6174 3588

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

USPS TRACKING #



9590 9402 52

15

PU-19-387

Filed: 1/30/2020

Pages: 2

Return receipt - 7019-0700-0000-6174-3588

USPS

Mail
Fees Paid
-10

United States
Postal Service

ND
PUBLIC SERVICE COMMISSION

JAN 30 2020

RECEIVED

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

