

pu-20-193

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.

Pete Beithon
 Manager Regulatory Recovery
 Otter Tail Power Company
 215 S Cascade St.
 Fergus Falls, MN 56537
 Cert. No. 7020 1290 0001 6150 3151
 Case No. PU-20-193

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
 X BN

B. Received by (Printed Name) C. Date of Delivery
 CT COVID 2-8-21

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



9590 9402 6024 0069

3. Service Type Priority Mail Express®

21 PU-20-193 Filed 02/11/2021 Pages: 2

Return receipt
United States Postal Service

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

7020 1290 0001 6150 3151

USPS TRACKING #

FARGO, ND 581

First-Class Mail

Fees Paid

G-10



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PU-20-193

Filed: 2/11/2021

Pages: 2

Return receipt

9590 9402

United States Postal Service

United States
Postal Service

box®

RECEIVE

FEB 11 2021

NORTH DAKOTA
PUBLIC SERVICE COMMISSION

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

