

TU-20-383

**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.

ary Stephenson  
 Associate General Counsel  
 ter Tail Power Company  
 Box 496  
 rgus Falls, MN 56538-0496  
 art. No. 7019 2280 0000 0692 7665  
 Case No. PU-20-383

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Addressee

**X** *Chris Thompson*

B. Received by (Printed Name) *Chris Thompson*

C. Date of Delivery *11-24-20*

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

3.  Service Type  Priority Mail Express®



9590 9402 6143 0209 1396 73

719 2280 0000 0692 7665

16 PU-20-383 Filed 11/27/2020 Pages: 2

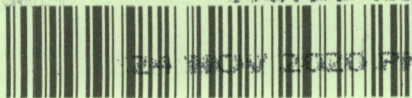
Return receipt

United States Postal Service

Insured Mail  Signature Confirmation  
 Insured Mail Restricted Delivery  Restricted Delivery  
 (over \$500)

USPS TRACKING#

FARGO ND 581



04 NOV 2020 PM 2 L

9590 9402 6143 0209 1396 73



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

NOV 27 2020

United States  
Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box•

NORTH DAKOTA

PUBLIC SERVICE COMMISSION

ND Public Service Commission  
Attn: Public Utilities Division  
600 E Boulevard Ave. Dept. 408

16 PU-20-383 Filed: 11/27/2020 Pages: 2 480  
Return receipt

United States Postal Service

