

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.

Darlene Mandelke
 Rates Analyst
 Otter Tail Power Company
 215 S Cascade Street
 Fergus Falls, MN 56538-0496
 Cert. No. 7020 1290 0001 6150 6169

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *BW*

- Agent
- Addressee

B. Received by (Printed Name)

CT COWD

C. Date of Delivery

2-8-21

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



9590 9402 6024 0069 35

12 PU-21-30 Filed 02/12/2021 Pages: 2

Return receipt

United States Postal Service

7020 1290 0001 6150 6169

3. Service Type

Priority Mail Express®

- Insured Mail
- Insured Mail Restricted Delivery (over \$500)

- Signature Confirmation
- Restricted Delivery

09 FEB

USPS TRACKING #

2021

First-Class Mail

Paid



12

PU-21-30

Filed: 2/12/2021

Pages: 2

Return receipt

9590 9402 6024

United States Postal Service

United States
Postal Service

RECEIVED

FEB 12 2021

NORTH DAKOTA
PUBLIC SERVICE COMMISSION

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

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