

PU-21-92

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
 ociate General Counsel
 er Tail Power Company
 Box 496
 gus Falls, MN 56538-0496
 t. No. 7020 1810 0000 0894 1830
 Case No. PU-21-92

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Chris Thompson* Agent Addressee

B. Received by (Printed Name)
Chris Thompson

C. Date of Delivery
5-10-21

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



9590 9402 6611 1028

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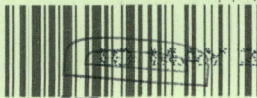
Return receipt
United States Postal Service

2.

7020 1810 0000 0894 1830

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

USPS TRACKING #



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Pages: 2

Return receipt

United States Postal Service

9590 9402 6611 10

United States
Postal Service

RECEIVED
MAY 12 2021

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

