

Pu-22-87

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.

1. Article Addressed to:

Cary Stephenson
 Associate General Counsel
 Otter Tail Power Company
 PO Box 496
 Fergus Falls, MN 56538-0496
 Cert. No. 7020 1290 0000 1334 4468
 Case No. PU-22-87



9590 9402 6453 0346 0119 66

2.

7020 1290 0000 1334 4468

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Chris Thompson*

Agent

Addressee

B. Received by (Printed Name)

Chris Thompson

C. Date of Delivery

4-4-22

D. Is delivery address different from item 1?

Yes

If YES, enter delivery address below:

No

7 PU-22-87 Filed 04/06/2022 Pages: 4
 Return receipts (2)
 United States Postal Service

3. Service Type

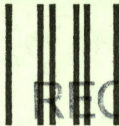
- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)

- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

USPS TRACKING #



9590 9402 6453 0346 0119 66



RECEIVED

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

APR - 6 2022

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

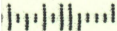
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PU-22-87
Return receipts (2)

Filed: 4/6/2022

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United States Postal Service



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1. Article Addressed to:

William Radar
 Rates Analyst - Regulatory Administration
 Otter Tail Power Company
 PO Box 496
 Fergus Falls, MN 56538-0496
 Cert. No. 7020 1290 0000 1334 4598
 Case No. PU-22-87



9590 9402 6453 0346 0118 36

2.

7020 1290 0000 1334 4598

COMPLETE THIS SECTION ON DELIVERY**A. Signature**

X *Chris Thompson* Agent
 Addressee

B. Received by (Printed Name)

Chris Thompson

C. Date of Delivery

4-4-22

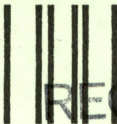
D. Is delivery address different from item 1?

If YES, enter delivery address below: Yes
 No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

USPS TRACKING #



RECEIVED

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

9590 9402 6453 0346 0118 36

APR - 6 2022

United States
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PUBLIC SERVICE COMMISSION
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Return receipts (2)

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