

PU-22-429

**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:

Richard Savelkoul  
 Martin & Squires, P.A.  
 332 Minnesota Street, Suite W2750  
 St. Paul, MN 55101  
 Cert. No. 7021 2720 0000 4438 7696  
 Case No. PU-22-429



9590 9402 7987 2305 9074 94

2. Article Number (Transfer from service label)

7021 2720 0000 4438 7696

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *Karin Myhr*

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

5/4/23

D. Is delivery address different from item 1?  Yes

If YES, enter delivery address below:

No

41 PU-22-429 Filed 05/08/2023 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)

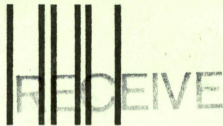
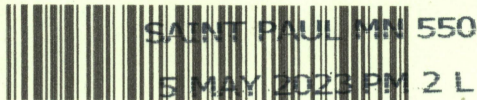
Priority Mail Express®

Registered Mail™

Registered Mail Restricted Delivery

Signature Confirmation™

USPS TRACKING #



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

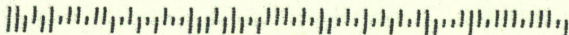
9590 9402 7987 2305 9074 94

MAY - 8 2023

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  
Bismarck, ND 58505-0480

05-048099



PU-22-429

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Stuart Tommerdahl  
 Manager, Regulatory Economics  
 Otter Tail Power Company  
 PO Box 496  
 Fergus Falls, MN 56538-0496  
 Cert. No. 7021 2720 0000 4438 7689  
 Case No. PU-22-429



9590 9402 7987 2305 9074 87

2. Article Number (Transfer from service label)

7021 2720 0000 4438 7689

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

Agent

Addressee

B. Received by (Printed Name)

STUART Tommerdahl

C. Date of Delivery

5/3/23

D. Is delivery address different from item 1?  Yes

If YES, enter delivery address below:

Yes

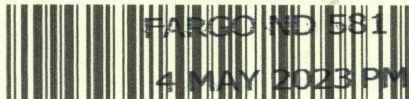
No

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 #



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

RECEIVED

9590 9402 7987 2305 9074 87

United States  
Postal Service

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

MAY - 8 2023

NORTH DAKOTA  
PUBLIC SERVICE COMMISSION  
ND Public Service Commission  
Attn: Public Utilities Division  
600 E Boulevard Ave. Dent. 408

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Return receipts (2)

United States Postal Service