

PU-23-66

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:

Nathan Jensen
 Manager, Resource Planning
 Otter Tail Power Company
 215 S Cascade Street
 Fergus Falls, MN 56538-0496
 Cert. No. 9589 0710 5270 0129 6580 04
 Case No. PU-23-66



9590 9402 8849 4005 9629 31

9589 0710 5270 0129 6580 04

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X. Ste
 Agent
 Addressee

B. Received by (Printed Name)
 C. Date of Delivery
 7.29.24

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

76 PU-23-66 Filed:07/31/2024 Pages: 2
 Return Receipt (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

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

USPS TRACKING#



FARGO ND 581
 29 JUL 2024 PM 1 L

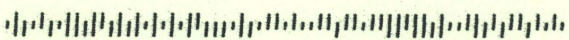
PUBLIC SERVICE COMMISSION

United States Postal Service
 NORTH DAKOTA
 PUBLIC SERVICE COMMISSION
 JUL 31 2024

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

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

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




PU-23-66

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Article Addressed to:

Cary Stephenson
 Associate General Counsel
 Otter Tail Power Company
 215 S Cascade Street
 Fergus Falls, MM 56538-0496
 Cert. No. 9589 0710 5270 0129 6579 77
 Case No. PU-23-66



9590 9402 8849 4005 9629 55

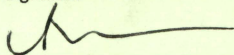
2. Article Number (Transfer from service label)

9589 0710 5270 0129 6579 77

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Agent
 Addressee

X 

B. Received by (Printed Name)

C. Date of Delivery

7-29-24

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

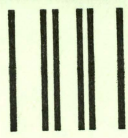
3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Insured Mail
 - Insured Mail Restricted Delivery (over \$500)
 - Priority Mail Express®
 - Registered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

USPS TRACKING #

9590 9402 8849 4005 9629 55

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29 JUL 2024 PM 1 L



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 JUL 31 2024
 PUBLIC SERVICE COMMISSION

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