PU-23-342

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.

PO Box 496

- 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. A delegand to

Lauren Donofrio Senior Associate General Counsel - Regulatory Otter Tail Power Company

Fergus Falls, MN 56538-0496 Cert. No. 9589 0710 5270 1582 7554 53 Case No. PU-23-342



9590 9402 8147 3030 8013 51

2. Article Number (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

□ No

D. Is delivery address different from item 1? If YES, enter delivery address below:

Adult Signature Restricted Delivery Certified Mail®

Service Type

□ Adult Signature

☐ 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

9589 0410 5240 1582 4554 53 PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt



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

9590 9402 8147 3030 8013 51

RECEIVED Appropries Appropriate Postal Service

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

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

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