

PU-24-344

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. 9589 0710 5270 0129 6620 25
 Case No. PU-23-344



9590 9402 8606 3244 9336 48

2. Article Number (Transfer from service label)

9589 0710 5270 0129 6620 25

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Chris Thompson*

- Agent
- Addressee

B. Received by (Printed Name)

Chris Thompson

C. Date of Delivery

12-9-24

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

8 PU-24-344 Filed 12/11/2024 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 #



9590 9402 8606 3244 9336 48



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

**United States
Postal Service**

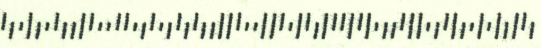
• Sender: Please print your name, address, and ZIP+4® in this box•

RECEIVED

DEC 11 2024

NORTH DAKOTA
PUBLIC SERVICE COMMISSION

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



PU-24-344

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1. Article Addressed to:

Seth Syverson
 General Manager
 Northern Plains Electric Cooperative
 PO Box 180
 Carrington, ND 58421-0180
 Cert. No. 9589 0710 5270 0129 6620 32
 Case No. PU-24-344



9590 9402 8606 3244 9336 31

2. Article Number (Transfer from service label)

9589 0710 5270 0129 6620 32

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Seth Syverson* Agent Addressee

B. Received by (Printed Name) C. Date of Delivery
Seth Syverson 12/9/2024

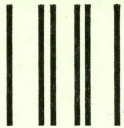
D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

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 8606 3244 9336 31



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

United States Postal Service

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 Bismarck, ND 58505-0480

