

PU-25-232

**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:**

Paula Foster  
 Supervisor Regulatory Analysis  
 Otter Tail Power Company  
 PO Box 496  
 ergus Falls, MN 56538-0496  
 Cert. No. 9589 0710 5210 2708 2378 91  
 Case No. PU-25-232



9590 9402 9542 5121 0533 33

**2. Article Number (Transfer from service label)**

9589 0710 5210 2708 2378 91

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X *CWT*  Agent  Addressee

B. Received by (Printed Name) *CWT* C. Date of Delivery *12-21-25*

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

25 PU-25-232 Filed 12/26/2025 Pages: 3  
 Return Receipt (3)

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

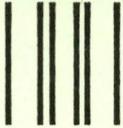
PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

USPS TRACKING #



9590 9402 9542 5121 0533 33



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•

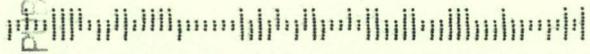
ND Public Service Commission  
 Attn: Public Utilities Division  
 600 E Boulevard Ave Dept. 408  
 Bismarck, ND 58505-0480

RECEIVED

DEC 26 2025

NORTH DAKOTA

PUBLIC SERVICE COMMISSION



PU-25-232

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1  
Cary Stephenson  
Associate General Counsel  
Otter Tail Power Company  
PO Box 496  
Fergus Falls, MN 56538-0496  
Cert. No. 9589 0710 5270 1777 9873 17  
Case No. PU-25-232



9590 9402 8005 2305 4425 46

2. Article Number (Transfer from service label)

9589 0710 5270 1777 9873 17

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *CWT*

- Agent
- Addressee

B. Received by (Printed Name)

*CWT*

C. Date of Delivery

*12-21-25*

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

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

Domestic Return Receipt

USPS TRACKING#



9590 9402 8005 2305 4425 46



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

United States  
Postal Service

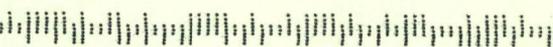
• Sender: Please print your name, address, and ZIP+4® in this box•

*ND Public Service Commission  
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600 E Boulevard Ave. Dept. 408  
Bismarck, ND 58505-0480*

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1. Article Addressed to:

Derek Haugen  
 Rates Analyst Regulatory Economics  
 Otter Tail Power Company  
 PO Box 496  
 Fergus Falls, MN 56538-0496  
 Cert. No. 9589 0710 5270 2708 2378 84  
 Case No. PU-25-232



9590 9402 9542 5121 0533 40

2. Article Number (Transfer from service label)

9589 0710 5270 2708 2378 84

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X *CWT*  Agent  Addressee

B. Received by (Printed Name) *CWT* C. Date of Delivery *12-21-20*

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 If YES, enter delivery address below:  No

3. Service Type

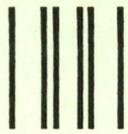
|  |   |
|--|---|
| <input type="checkbox"/> Adult Signature                               | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery           | <input type="checkbox"/> Registered Mail™                           |
| <input type="checkbox"/> Certified Mail®                               | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery            | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery                           | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery       |   |
| <input type="checkbox"/> Insured Mail                                  |   |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) |   |

Domestic Return Receipt

USPS TRACKING #



9590 9402 9542 5121 0533 40



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

United States Postal Service

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