

pu-14-644; Notice 10/8/14

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

ALISON C ARCHER
 ASSISTANT GENERAL COUNSEL
 XCEL ENERGY SERVICES, INC.
 414 NICOLLET MALL 5TH FL
 MINNEAPOLIS MN 55401

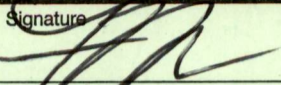
2. Article Number
(Transfer from service label)

7013 2250 0001 0313 9003

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X



Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below:

No



3. Service Type

Certified Mail®

Priority Mail Express™

Registered

Return Receipt for Merchandise

Insured Mail

Collect on Delivery

4. Restricted Delivery? (Extra Fee)

Yes

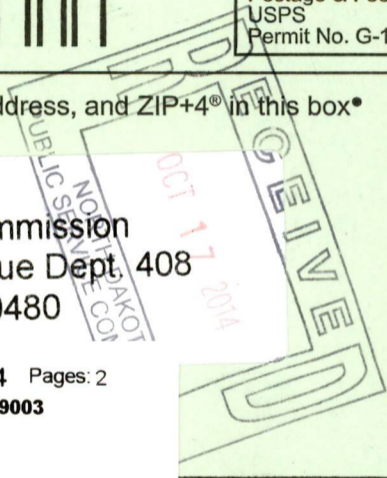
UNITED STATES POSTAL SERVICE



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

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

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



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PU-14-644 Filed: 10/17/2014 Pages: 2
Return receipt – 7013-2250-0001-0313-9003

USPS

