

pu-16-19

**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.

Alison C. Archer  
 Assistant General Counsel  
 Xcel Energy  
 414 Nicollet Mall, 5th Floor  
 Minneapolis, MN 55401-1993  
**Cert. No. 7015 0640 0006 6993 6606**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X** *Susan Nerheim*

- Agent  
 Addressee

B. Received by (Printed Name)

*SUSAN NERHEIM*

C. Date of Delivery

*2/3/17*

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



9590 9402 232

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 Return receipt - 7015-0640-0006-6993-6606  
 USPS

2. Article Number (Transfer from service label)

**Cert. No. 7015 0640 0006 6993 6606**

- Collect on Delivery Restricted Delivery  Signature Confirmation™  
 Insured Mail  Signature Confirmation  
 Insured Mail Restricted Delivery (over \$500)  Restricted Delivery

pu-16-19

USPS TRACKING #



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

29

PU-16-19

Filed: 2/6/2017

Pages: 2

Return receipt - 7015-0640-0006-6993-6606

95

Unit  
Post

USPS

ZIP+4® in this box\*

RECEIVED  
FEB - 6 2017  
NORTH DAKOTA  
PUBLIC SERVICE COMMISSION

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

