

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.

Zeviel Simpser
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 Dorsy & Whitney LLP
 50 South Sixth Street Suite 1500
 Minneapolis, MN 55402-1498
 Cert. No. 7019 2280 0001 7941 3125
 Case No. PU-19-310

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent

Addressee

B. Received by (*Printed Name*)

C. Date of Delivery

1 Sept

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

3. Service Type

Priority Mail Express®



9590 9402 5377 9189 4895 0

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 Return receipt
 United States Postal Service

2. Article Number

7019 2280 0001 7941 3125

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

Signature Confirmation Restricted Delivery

USPS TRACKING # 9505



9590 9402 5

United States
Postal Service

RECEIVED
SEP - 4 2020

NORTH DAKOTA
PUBLIC SERVICE COMMISSION

85 PU-19-310
Return receipt

Filed: 9/4/2020

Pages: 2

First-Class Mail
Fees Paid
G-10

United States Postal Service

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

