

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.

David Sederquist
 Sr. Regulatory & Financial Consultant
 Xcel Energy
 PO Box 2747
 Fargo, ND 58108-2747
 Cert. No. 7019 0700 0000 6174 3717
 Case Nos. PU-20-37 and PU-20-41



9590 9402 5222 9122 3524 41

2. Article Number

7019 0700 0000 6174 3717

COMPLETE THIS SECTION ON DELIVERY

A. Signature

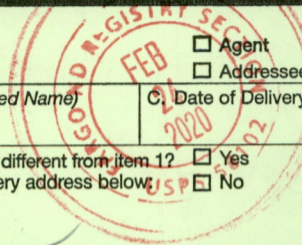
X

-
- 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


 7 PU-20-41 Filed 02/26/2020 Pages: 2
 Return receipt - 7019-0700-0000-6174-3717 to

 6 PU-20-37 Filed 02/26/2020 Pages: 2
 Return receipt - 7019-0700-0000-6174-3717

 Insured Mail Restricted Delivery
 (over \$500)

Restricted Delivery

USPS TRACKING #



9590 9402

United States
Postal Service

RECEIVED

FEB 26 2020

NORTH DAKOTA
SERVICE COMMISSION

6

PU-20-37

Filed: 2/26/2020

Pages: 2

Return receipt - 7019-0700-0000-6174-3717

USPS

Mail
Fees Paid
G-10

box*

*ND Public Service Commission
Attn: Public Utilities Division
600 E Boulevard Ave. Dept. 408*

7

PU-20-41

Filed: 2/26/2020

Pages: 2

Return receipt - 7019-0700-0000-6174-3717

USPS