

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 and Financial Consultant
 Xcel Energy
 PO Box 2747
 Fargo, ND 58108-2747
 Cert. No. 7020 1290 0001 6150 6060
 Case No. PU-20-441



9590 9402 6024 0069 394

2. Article Number (Transfer from...)

7020 1290 0001 6150 6060

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent

Addressee

B. Received by (Printed Name)

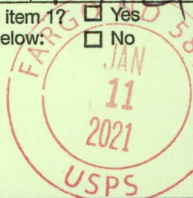
C. Date of Delivery

1-11-21

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below:

No



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Return receipt

United States Postal Service

Collect on Delivery Restricted Delivery

Insured Mail

Insured Mail Restricted Delivery (over \$500)

Signature Confirmation™

Signature Confirmation Restricted Delivery

USPS TRACKING #



9590 9402

United States
Postal Service

RECEIVED
JAN 19 2021

NORTH DAKOTA
PUBLIC SERVICE COMMISS

40 PU-20-441
Return receipt

Filed: 1/19/2021

Pages: 2

United States Postal Service

First-Class Mail
& Fees Paid
G-10

box*

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