

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.

Christine Schwartz
 Regulatory Administrator
 Xcel Energy
 414 Nicollet Mall, 401-7
 Minneapolis, MN 55401
 Cert. No. 7016 1970 0001 1484 4719
 Case No. PU-22-368



9590 9402 7805 2152 9930 43

7016 1970 0001 1484 4719

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

The Clerk

Agent

Addressee

B. Received by (Printed Name)

Thomas Leopold

C. Date of Delivery

FEB 27 2023

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

3. Service Type

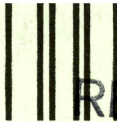
- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

USPS TRACKING #



9590 9402 7805 2152 9930 43

United States
Postal Service



RECEIVED

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

MAR - 6 2023

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

NORTH DAKOTA
PUBLIC SERVICE COMMISSION
ND Public Service Commission
Attn: Public Utilities Division
600 E. Boulevard Ave. Dept. 408

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Return receipt

United States Postal Service