

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. Article Addressed to:

Christine Schwartz
 Regulatory Administrator
 Xcel Energy
 414 Nicollet Mail – 401, 7th Floor
 Minneapolis, MN 55401
 Cert. No. 7021 2720 0000 4438 7016
 Case No. PU-402



9590 9402 7805 2152 9855 67

2. **7021 2720 0000 4438 70116**

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Kevin Finstad*

- Agent
- Addressee

B. Received by (Printed Name)

KEVIN FINSTAD

C. Date of Delivery

1-30-23

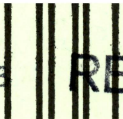
- D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

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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 #



RECEIVED

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

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FEB - 2 2023

United States
Postal Service

• 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

