

PU-24-349

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.

Christine Schwartz
 Regulatory Administrator
 Xcel Energy
 414 Nicollet Mall – 401, 7th Floor
 Minneapolis, MN 55401
 Cert. No. 9589 0710 5270 0129 6616 39
 Case No. PU-24-349



9590 9402 8606 3244 9334 95

2. Article Number (Transfer from service label)

9589 0710 5270 0129 6616 39

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

X *[Signature]*

B. Received by (Printed Name) Agent
KEVIN TINSTAD Addressee

C. Date of Delivery *10-29-24*

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

8 PU-24-349 Filed 11/04/2024 Pages: 1
 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

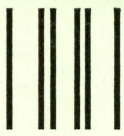
PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

USPS TRACKING #



9590 9402 8606 3244 9334 95



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

United States Postal Service

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

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

RECEIVED

NOV 4 2024

NORTH DAKOTA PUBLIC SERVICE COMMISSION

