

**HEARING NOTIFICATION LISTING SERVICE - 1510 LAUREL AVE**

Legislative Hearing: **Tuesday, June 10, 2025**

Publication Dates: **May 15 and 19, 2025**

City Council Hearing: **Wednesday, July 16, 2025**

Owners, Interested Parties, etc.	US Mail	CERTIFIED MAIL		PERSONAL SERVICE		Resolution Mail Date	ENS Posting Date	OTA Mail Date
		Sent	Received	Sent	Received			
Joanne Backer 111 Kellogg Blvd E #1002 St Paul MN 55101	5/9/25			5/9/25	Affidavit not found 5/13/25			5/9/25
US Bank NA ND 4325 17 <sup>th</sup> Avenue SW Fargo ND 58103		5/9/25	5/13/25					3/24/25
Union Park District Council							5/9/25	

STATE OF MINNESOTA

AFFIDAVIT OF NOT FOUND

COUNTY OF HENNEPIN

**METRO LEGAL SERVICES**

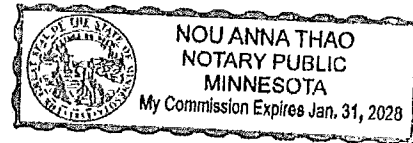
Soudavanh Chanthakeo, agent for Metro Legal Services, Inc., being duly sworn, on oath deposes and states that agents in her employ attempted to serve the Notice Of Public Hearings upon Joanne Backer, therein named, personally at his/her last known address located at Unit 1002, 111 Kellogg Blvd E, Saint Paul, County of Ramsey, State of Minnesota, and was unable to locate him/her there for the purpose of effecting personal service of process.

S. Chanthakeo 5/13/2025  
Soudavanh Chanthakeo, Process Server

Subscribed and sworn to before me on

5/13/2025

[Signature]



**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:

US Bank NA ND  
4325 17th Avenue SW  
Fargo ND 58103



9590 9402 5834 0038 9626 00

2. Article Number (Transfer from service label)

4 2870 0002 0480 1394

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *Dené Hidanovic*

- ☐ Agent  
☐ Addressee

B. Received by (Printed Name)

Dené Hidanovic

C. Date of Delivery

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

3. Service Type

- |  |   |
|--|---|
| <input type="checkbox"/> Adult Signature                         | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery     | <input type="checkbox"/> Registered Mail™                           |
| <input checked="" type="checkbox"/> Certified Mail®              | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery      | <input checked="" type="checkbox"/> Return Receipt for Merchandise  |
| <input type="checkbox"/> Collect on Delivery                     | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail™                           |   |

Restricted Delivery

1510 12/11/11