

PU-14-620 Notice of Opportunity for Hearing

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

PARADIGM MIDSTREAM SERVICES  
 C/O C T CORPORATION SYSTEM  
 314 E THAYER AVE  
 BISMARCK ND 58501-4018

2. Article Number  
(Transfer from service label)

7012 2210 0001 5060 8012

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

x *B Ballou*

- Agent  
 Addressee

B. Received by (Printed Name)

*B Ballou*

C. Date of Delivery

*8/7/14*

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

3. Service Type

- Certified Mail®  Priority Mail Express™  
 Registered  Return Receipt for Merchandise  
 Insured Mail  Collect on Delivery

4. Restricted Delivery? (Extra Fee)  Yes

UNITED STATES POSTAL SERVICE

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

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

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

9

PU-14-620 Filed: 8/8/2014 Pages: 2  
Return receipt - 7012-2210-0001-5060-8012

USPS