



0000000839



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

Arizona Corporation Commission  
1200 West Washington - Hrg Div./Docket  
Phoenix, Arizona 85007-2996

516

**SENDER:**  
• Complete items 1, 2 and 3.  
• Indicate if restricted delivery is desired.  
• Print your name and address on the reverse of this form so that we can return this card to you.  
• Attach this form to the front of the mailpiece, or on the back if space does not permit.  
• Write "Return Receipt Requested" on the mailpiece below the article number.  
• The Return receipt Fee will provide you the signature of the person delivered to and the date of delivery.

I also wish to receive the following service (for an extra fee):

**Restricted Delivery**

Consult postmaster for fee.

1. Article Addressed to:  
**AZ Reporting Service, Inc**  
**2627 N. Third Street, Suite Three**  
**Phoenix, AZ 85004-1104**

**RECEIVED**

7180 4442 0100 0000 6326

2004 MAR 10 A 11: 04

3. Service Type  **CERTIFIED**

AZ CORP COMMISSION  
DOCUMENT CONTROL

Date of Delivery

Received By: (Print Name)

*Ashley Carpenter*

Signature - (Addressee or Agent)

*Ashley Carpenter*  
042204 05 0015

Enter delivery address if different than item 1.

PS Form 381

**DOMESTIC RETURN RECEIPT**

