



0000010903

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) 7/26/09

C. Date of Delivery 7/26/09

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

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:

Gregory Hoffman
 AT&T Communications Of The Mountain States, Inc.
 795 Folsom Street, Room 2159
 San Francisco, CA 94107-1243

2. Article (Transfer from service label) 7003 2260 0003 3128 5190

T-01051B-03-0454

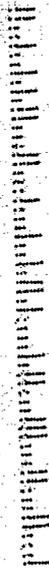
T-00000D-00-06732595-02-M-1540

Domestic Return Receipt

PS Form 3811, August 2001

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes



2004 AUG - 31 Arizona Corporation Commission
 Docket Control / Hearing
 1200 W Washington
 PHOENIX AZ 85007
 AZ CORP COMMISSION
 DOCUMENT CONTROL

• Please print your name, address, and ZIP+4 in this box.

RECEIVED

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

UNITED STATES POSTAL SERVICE