**2. Article Number**

7180 4442 0100 0001 4420

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature
X M Savasta
☐ Agent
☐ Addressee

B. Received by *(Printed Name)*

C. Date of Delivery
5/17

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

1. Article Addressed to:

*Michael Kalmus*
*850 Third Ave. 14th Flr.*
*New York, NY 10022*

3. Service Type ☒ **Certified**

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

*S-035557A-04-0000*

PS Form 3811

**Domestic Return Receipt**

**UNITED STATES POSTAL SERVICE**

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

*Arizona Corporation Commission*
*Docket Control / Hearing*
*1200 W Washington*
*Phoenix AZ 85007*

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DOCUMENT CONTROL

Arizona Corporation Commission
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