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:

Jana Van Ness
Arizona Public Service Company
P. O. Box 53999
Mail Station 9905
Phoenix. AZ 85072

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)* Demand Safford

B. Date of Delivery JAN 17 2001

C. Signature X [signature] ☐ Agent ☐ Addressee

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

E03869A000268

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

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

2. Article Number *(Copy from service label)* 7000 0600 0023 9790 1376

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

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

ARIZONA CORPORATION COMMISSION
1200 W. Washington - Hrg. Div./Docket
Phoenix, Arizona 85007-2996

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