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:

Arizona Reporting Service, Inc.
2627 N. Third Street
Suite Three
Phoenix, AZ 85004-1104

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)* Norma Mendoza

B. Date of Delivery 4-5

C. Signature X

☐ Agent
☐ Addressee

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

DOWNTOWN STA PHOENIX AZ
APR - 5 2001
USPS - 85004

T02579A92-0190

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)*
Z 410 643 320

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

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

RECEIVED
APR -6 A 11:49
ARIZONA CORPORATION COMMISSION
AZ CORP COMMISSION
1200 W. Washington - Hrg. Div./Docket
DOCUMENT CONTROL
Phoenix, Arizona 85007-2996

UNITED STATES POSTAL SERVICE

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

0000030382