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:

Lance J. M. Steinhart
Attorney at Law
6455 E. Johns Crossing
Suite 285
Duluth, Georgia 30097

11 APR

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly): KCampbell
B. Date of Delivery: 4-11-01
C. Signature: X [signature]
☐ Agent
☐ Addressee
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

T03973A001038

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) 7 4110 643 315

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

00000305 40

UNITED STATES POSTAL SERVICE

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

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

RECEIVED
2001 APR 17 A 10:30
AZ CORP COMMISSION
DOCUMENT CONTROL
ARIZONA CORPORATION COMMISSION
1200 W. Washington - Hrg. Div./Docket
Phoenix, Arizona 85007-2996