0000039407

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:

rizona Reporting Service, Inc.
627 N. Third Street
Suite Three
Phoenix, AZ 85004-1104

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly): MARTA HETZER
B. Date of Delivery: 5/31/01
C. Signature: X Marta Hetzer ☐ Agent ☐ Addressee
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

SW 04602A016228
WS 02987A018295

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 0669

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

RECEIVED
2001 JUN -5 PM 12:13
AZ CORP COMMISSION
DOCUMENT CONTROL

• Seal: 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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