0000045200

516

SENDER:
- Complete items 1,2 and 3.
- Indicate if restricted delivery is desired.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return receipt Fee will provide you the signature of the person delivered to and the date of delivery.

I also wish to receive the following service (for an extra fee):

☐ **Restricted Delivery**

Consult postmaster for fee.

1. Article Addressed to:

Michael W. Patten Esq.
ROSHKA HEYMAN & DEWULF, PLC
One Arizona Center
400 East Van Buren, Ste. 800
Phoenix, AZ 85007

2. Article Number

716 . 001 . . . 4

3. Service Type ☒ **CERTIFIED**

Date of Delivery

7-25 BK

Received By: (Print Name)

Alicia Bonn

Signature - (Addressee or Agent)

Alicia Bonn

Enter delivery address if different than item 1.

PS Form 3811 *T-03793A-99-0608* **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

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

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