0000048375

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:

Continental Divide Eelctric Coop
PO Box 786
Gallup NewMexico 8730

GALLUP NM 87301
DEC 15 2000
USPS

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)* J Baumgardner
B. Date of Delivery

C. Signature
X J Baumgardner
☒ Agent
☐ Addressee

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

V-00000 V-00-0106

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 2786

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

UNITED STATES POSTAL SERVICE

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

GALLUP NM 87301
DEC 15 2000
PM

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

RECEIVED
2000 DEC 20 A 11:05
AZ CORP COMMISSION
DOCUMENT CONTROL

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

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:

. Wayne Smith
106 South 32nd Street
hoenix AZ 85040

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)* B. Date of Delivery

C. Signature
X ☐ Agent ☐ Addressee

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

L-000006V-00-0106

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 6753

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

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:

Gila Bend Sun
480 Butterfield Trail
Gila Bend AZ 85337

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)* B. Date of Deliv
Glen Butfill 12-18-2

C. Signature
X ☐ Agent ☐ Address

D. Is delivery address different from item 1? ☒ Yes
If YES, enter delivery address below: ☐ No
P.O. Box "Z"

L-000000V-00-0106

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

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

2. Article Number *(Copy from service label)*
7000060000239790 2571

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-09

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
2000 DEC 20 A 11:05
AZ CORP COMMISSION
DOCUMENT CONTROL

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

UNITED STATES POSTAL SERVICE

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USPS
Permit No. G-10

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

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

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2000 DEC 20 A 11:05
AZ CORP COMMISSION
DOCUMENT CONTROL