Is your RETURN ADDRESS completed on the reverse side?

SENDER: L-00000V-00-0106

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ 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 will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

Mary Rose Wilcox
Maricopa Co Board of Supervisors
301 West Jefferson
Phoenix AZ 85003

4a. Article Number: 7099 3220 0005 6650 6769

4b. Service Type: ☐ Registered ☒ Certified ☐ Express Mail ☐ Insured ☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: SEP 21 2000

5. Received By: *(Print Name)* Carri Alvarez

6. Signature *(Addressee or Agent)*

8. Addressee's Address *(Only if requested and fee is paid)*

DOWNTOWN STA PHOENIX AZ USPS - 85004

PS Form **3811**, December 1994 102595-99-B-0223 Domestic Return Receipt

Thank you for using Return Receipt Service.

SENDER: L-00000V-00-0106

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ 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 will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

Don Stapley
Maricopa Co Board of Supervisors
301 West Jefferson
Phoenix AZ 85003

4a. Article Number: 7099 3220 0005 6650 6752

4b. Service Type: ☐ Registered ☒ Certified ☐ Express Mail ☐ Insured ☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: SEP 21 2000

5. Received By: *(Print Name)* Carri Alvarez

6. Signature *(Addressee or Agent)*

8. Addressee's Address *(Only if requested and fee is paid)*

DOWNTOWN STA PHOENIX AZ USPS - 85004

PS Form **3811**, December 1994 102595-99-B-0223 Domestic Return Receipt

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

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

• Print your name, address, and ZIP Code in this box •

AZ CORP COMMISSION
DOCUMENT CONTROL

ARIZONA CORPORATION COMMISSION
DOCKET CONTROL CENTER
1200 WEST WASHINGTON STREET
PHOENIX, ARIZONA 85007

2000 SEP 25 A 11:38

RECEIVED

UNITED STATES POSTAL SERVICE

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

• Print your name, address, and ZIP Code in this box •

AZ CORP COMMISSION
DOCUMENT CONTROL

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

2000 SEP 25 A 1:38

RECEIVED

0000048383

SENDER: L-00000V-00-0106

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ 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 will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

Fulton Brock
Maricopa Co Board of Supervisors
301 West Jefferson
Phoenix AZ 85003

4a. Article Number
7099 3220 000 5 6650 6660

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery
SEP 2 1 2000

DOWNTOWN STA PHOENIX AZ USPS - 85004

5. Received By: *(Print Name)*
Carry Alvarez

6. Signature *(Addressee or Agent)*

8. Addressee's Address *(Only if requested and fee is paid)*

PS Form **3811,** December 1994 102595-99-B-0223 Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER: L-00000V-00-0106

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ Print your name and address on the reverse of this form so that we can return this card to you.
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- ☐ Write *"Return Receipt Requested"* on the mailpiece below the article number.
- ☐ The Return Receipt will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

Dennis Sundie
Department of Water Resources
500 North 3rd Street
Phoenix AZ 85004-3903

4a. Article Number
7099 3220 0005 6650 6356

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery
SEP 2 1 2000

DOWNTOWN STA PHOENIX AZ USPS - 85004

5. Received By: *(Print Name)*
D Haywood

6. Signature *(Addressee or Agent)*
D Haywood

8. Addressee's Address *(Only if requested and fee is paid)*

PS Form **3811,** December 1994 102595-99-B-0223 Domestic Return Receipt

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

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

• Print your name, address, and ZIP Code in this box •

AZ CORP COMMISSION
DOCUMENT CONTROL
2000 SEP 25 AM 8:58
RECEIVED

ARIZONA CORPORATION COMMISSION
DOCKET CONTROL CENTER
1200 WEST WASHINGTON STREET
PHOENIX, ARIZONA 85007

UNITED STATES POSTAL SERVICE

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

• Print your name, address, and ZIP Code in this box •

AZ CORP COMMISSION
DOCUMENT CONTROL
2000 SEP 25 AM 8:58
RECEIVED

ARIZONA CORPORATION COMMISSION
DOCKET CONTROL CENTER
1200 WEST WASHINGTON STREET
PHOENIX, ARIZONA 85007

SENDER: L-00000V-00-0106

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ 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 will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

Chairman Paul Bullis
Office of the Attorney General
1275 West Washington
Phoenix AZ 85007

4a. Article Number: 7099 3220 0005 6650 6257

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: SEP 21 2000

5. Received By: *(Print Name)* Betty Sue Rhodes

6. Signature *(Addressee or Agent)* Betty Sue Rhodes

8. Addressee's Address *(Only if requested and fee is paid)*

PS Form **3811**, December 1994 102595-99-B-0223 Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER: L-00000V-00-0106

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ Print your name and address on the reverse of this form so that we can return this card to you.
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- ☐ Write *"Return Receipt Requested"* on the mailpiece below the article number.
- ☐ The Return Receipt will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

Janice K. Brewer
Maricopa Co Board of Supervisors
301 West Jefferson
Phoenix AZ 85003

4a. Article Number: 7099 3220 0005 6650 6677

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: SEP 21 2000

5. Received By: *(Print Name)* Carrie Alvarez

6. Signature *(Addressee or Agent)*

8. Addressee's Address *(Only if requested and fee is paid)*

DOWNTOWN STA PHOENIX AZ USPS - 85004

PS Form **3811**, December 1994 102595-99-B-0223 Domestic Return Receipt

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

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

• Print your name, address, and ZIP Code in this box •

ARIZONA CORPORATION COMMISSION
DOCKET CONTROL CENTER
1200 WEST WASHINGTON STREET
PHOENIX, ARIZONA 85007

AZ CORP COMMISSION DOCUMENT CONTROL
2000 SEP 25 A 8:58
RECEIVED

UNITED STATES POSTAL SERVICE

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

• Print your name, address, and ZIP Code in this box •

ARIZONA CORPORATION COMMISSION
DOCKET CONTROL CENTER
1200 WEST WASHINGTON STREET
PHOENIX, ARIZONA 85007

AZ CORP COMMISSION DOCUMENT CONTROL
2000 SEP 25 A 8:58

SENDER: L-00000V-00-0106

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ 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 will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

New West Energy Inc
PO Box 61868
Phoenix AZ 85082-1868

4a. Article Number: 7099 3220 0005 6650 6509

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: 9-22-00

5. Received By: *(Print Name)* M. Fister

6. Signature *(Addressee or Agent)*

8. Addressee's Address *(Only if requested and fee is paid)*

PS Form **3811**, December 1994 102595-99-B-0223 Domestic Return Receipt

Thank you for using Return Receipt Service.

SENDER: L-00000V-00-0106

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ 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 will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

Mohave Electric Coop
PO Box 1045
Bullhead City AZ 86430

4a. Article Number: 7099 3220 0005 6650 6400

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: 9/21/00

5. Received By: *(Print Name)* Robert Duff

6. Signature *(Addressee or Agent)*

8. Addressee's Address *(Only if requested and fee is paid)*

PS Form **3811**, December 1994 102595-99-B-0223 Domestic Return Receipt

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

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

• Print your name, address, and ZIP Code in this box •

ARIZONA CORPORATION COMMISSION
DOCKET CONTROL CENTER
1200 WEST WASHINGTON STREET
PHOENIX, ARIZONA 85007

2000 SEP 25 A 11:58

RECEIVED

UNITED STATES POSTAL SERVICE

LAS VEGAS NV 890
PM
SEP 2000

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

• Print your name, address, and ZIP Code in this box •

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

2000 SEP 25 A 11:59

RECEIVED

SENDER: L-00000V-00-0106

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ 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 will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

Mark McWhirter
Director of Commerce
3800 North Central Ave #1200
Phoenix AZ 85012

4a. Article Number: 7099 3220 0005 6650 6264

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: 9/21/00

5. Received By: *(Print Name)*

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature *(Addressee or Agent)*: Loretta A. Cooley

PS Form **3811**, December 1994 102595-99-B-0223 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

SENDER: L-00000V-00-0106

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ Print your name and address on the reverse of this form so that we can return this card to you.
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- ☐ The Return Receipt will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

City Attorney Steve McClure
Box 5
Gila Bend AZ 85337

4a. Article Number: 7099 3220 0005 6650 6776

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: 9-21-00

5. Received By: *(Print Name)*: ELIZABETH McCLURE

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature *(Addressee or Agent)*: Elizabeth McClure

PS Form **3811**, December 1994 102595-99-B-0223 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

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

• Print your name, address, and ZIP Code in this box •

ARIZONA CORPORATION COMMISSION
DOCKET CONTROL CENTER
1200 WEST WASHINGTON STREET
PHOENIX, ARIZONA 85007

RECEIVED
2000 SEP 25 A 11:58
AZ CORP COMMISSION
DOCUMENT CONTROL

UNITED STATES POSTAL SERVICE

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

• Print your name, address, and ZIP Code in this box •

SEP 25 2000
337

ARIZONA CORPORATION COMMISSION
DOCKET CONTROL CENTER
1200 WEST WASHINGTON STREET
PHOENIX, ARIZONA 85007

RECEIVED
2000 SEP 25 A 11:58
AZ CORP COMMISSION
DOCUMENT CONTROL

1 7

SENDER:

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ 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 will show to whom the article was delivered and the date delivered.

I-00000V-00-0106

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

Karen Peters
Squire, Sanders & Dempsey
40 North Central #2700
Phoenix AZ 85004

DOWNTOWN STA PHOENIX AZ SEP 22 2000 USPS 85004

4a. Article Number: 7099-3220-0005-6650-6448

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: 9-22-00

5. Received By: *(Print Name)* A Leonard

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature *(Addressee or Agent)* A Leonard

PS Form **3811**, December 1994 102595-99-B-0223 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

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

• Print your name, address, and ZIP Code in this box •

ARIZONA CORPORATION COMMISSION
DOCKET CONTROL CENTER
1200 WEST WASHINGTON STREET
PHOENIX, ARIZONA 85007

AZ CORP COMMISSION DOCUMENT CONTROL
2000 SEP 25 A 11:58
RECEIVED

SENDER:

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ 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 will show to whom the article was delivered and the date delivered.

I-00000V-00-0106

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

Tucson Electric Power
PO Box 27327
Tucson AZ 85756

4a. Article Number: 7099 3220 0005 6650 6325

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: 9-21-00

5. Received By: *(Print Name)* Ricky

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature *(Addressee or Agent)* Ricky

PS Form **3811**, December 1994 102595-99-B-0223 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

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

• Print your name, address, and ZIP Code in this box •

TUCSON AZ 857 PM 2000

ARIZONA CORPORATION COMMISSION
DOCKET CONTROL CENTER
1200 WEST WASHINGTON STREET
PHOENIX, ARIZONA 85007

AZ CORP COMMISSION DOCUMENT CONTROL
2000 SEP 25 A 11:57
RECEIVED

17

SENDER: L-00000V-00-0106

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ 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 will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

Ajo Copper News
PO Box 39
Ajo AZ 85321-0021

4a. Article Number: 7099 3220 0005 6650 6783

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: 9-21-00

5. Received By: *(Print Name)* Rose Martin

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature *(Addressee or Agent)* Rose Martin

PS Form **3811**, December 1994 102595-99-B-0223 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

SENDER: L-00000V-00-0106

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ Print your name and address on the reverse of this form so that we can return this card to you.
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- ☐ Write *"Return Receipt Requested"* on the mailpiece below the article number.
- ☐ The Return Receipt will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

PG &E Energy Services Coop
6900 East Camelback Rd #800
Scottsdale AZ 85251-0000

4a. Article Number: 7099 3220 0005 6650 6738

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: SEP 22 2000

5. Received By: *(Print Name)*

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature *(Addressee or Agent)* K Kitchen

PS Form **3811**, December 1994 102595-99-B-0223 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

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

• Print your name, address, and ZIP Code in this box •

ARIZONA CORPORATION COMMISSION
DOCKET CONTROL CENTER
1200 WEST WASHINGTON STREET
PHOENIX, ARIZONA 85007

AZ CORP COMMISSION
DOCUMENT CONTROL
2000 SEP 25 A 11:56

RECEIVED

17

UNITED STATES POSTAL SERVICE

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

• Print your name, address, and ZIP Code in this box •

RECEIVED
2000 SEP 25 A 11:57
AZ CORP COMMISSION
DOCUMENT CONTROL

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

SENDER:

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ 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 will show to whom the article was delivered and the date delivered.

L-00000V-00-0106

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

Enron Energy
4742 North 24th Street #165
Phoenix AZ 85016

4a. Article Number: 7099 3220 0005 6650 6486

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: 9/21/00

5. Received By: *(Print Name)* C. NACHTIGALL

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature *(Addressee or Agent)* C. Nachtigall

PS Form **3811**, December 1994 102595-99-B-0223 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

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

• Print your name, address, and ZIP Code in this box •

ARIZONA CORPORATION COMMISSION
DOCKET CONTROL CENTER
1200 WEST WASHINGTON STREET
PHOENIX, ARIZONA 85007

RECEIVED
2000 SEP 25 A 11:58
AZ CORP COMMISSION
DOCUMENT CONTROL

SENDER:

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ Print your name and address on the reverse of this form so that we can return this card to you.
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- ☐ Write *"Return Receipt Requested"* on the mailpiece below the article number.
- ☐ The Return Receipt will show to whom the article was delivered and the date delivered.

L-00000V-00-0106

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

Arizona Reporting Service Inc
2627 North 3rd Street #3
Phoenix AZ 85004-1103

4a. Article Number: 7099 3220 0005 6650 6479

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: 9-21

5. Received By: *(Print Name)* D GORLO

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature *(Addressee or Agent)* D Gorlo

PS Form **3811**, December 1994 102595-99-B-0223 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

First-Class Mail
Postage & Fees Paid
USPS
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• Print your name, address, and ZIP Code in this box •

ARIZONA CORPORATION COMMISSION
DOCKET CONTROL CENTER
1200 WEST WASHINGTON STREET
PHOENIX, ARIZONA 85007

RECEIVED
2000 SEP 25 A 11:58
AZ CORP COMMISSION
DOCUMENT CONTROL

SENDER: L-00000V-00-0106

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ 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 will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

Mayor Chuck L. Turner
BOX 733
Gila Bend AZ 85337

4a. Article Number: 7099 3220 0005 6650 6592

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: SEP 21 2000

5. Received By: *(Print Name)*

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature *(Addressee or Agent)*

PS Form **3811**, December 1994 102595-99-B-0223 Domestic Return Receipt

Thank you for using Return Receipt Service.

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• Print your name, address, and ZIP Code in this box •

GILA BEND
SEP 21 2000

AZ CORP COMMISSION
DOCUMENT CONTROL

ARIZONA CORPORATION COMMISSION
DOCKET CONTROL CENTER
1200 WEST WASHINGTON STREET
PHOENIX, ARIZONA 85007

2000 SEP 25 A 11:51

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17

SENDER: L-00000V-00-0106

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ Print your name and address on the reverse of this form so that we can return this card to you.
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- ☐ Write *"Return Receipt Requested"* on the mailpiece below the article number.
- ☐ The Return Receipt will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

Morenci Water and Electric
PO Box 68
Morenci AZ 85540

4a. Article Number: 7099 3220 0005 6650 6417

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: 9-22-00

5. Received By: *(Print Name)* SR ELMS

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature *(Addressee or Agent)*

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SENDER: L-00000V-00-0106

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- ☐ The Return Receipt will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

City Manager Carl J. Stephani
Box A
Gila Bend AZ 85337

4a. Article Number: 7099 3220 0005 6650 6684

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: SEP 21 2000

5. Received By: *(Print Name)*

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature *(Addressee or Agent)*

PS Form **3811,** December 1994 102595-99-B-0223 Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER: L-00000V-00-0106

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ Print your name and address on the reverse of this form so that we can return this card to you.
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- ☐ Write *"Return Receipt Requested"* on the mailpiece below the article number.
- ☐ The Return Receipt will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

Andrew Kunasek
Maricopa Co Board of Supervisors
301 West Jefferson
Phoenix AZ 85003

4a. Article Number: 7099 3220 0005 6650 6585

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: SEP 21 2000

5. Received By: *(Print Name)* Carri Alvarez

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature *(Addressee or Agent)*

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PHOENIX, ARIZONA 85007

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AZ CORP COMM
DOCUMENT CON

SENDER: L-00000V-00-0106

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ 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 will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:
Gila Bend Sun
480 Butterfield Trail
Gila Bend AZ 85337

4a. Article Number: 7099 3220 0005 6650 6691

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: 9-21-00

5. Received By: *(Print Name)* Colen Birchfield

8. Addressee's Address *(Only if requested and fee is paid)*: PO Box 2

6. Signature *(Addressee or Agent)*: Colen Birchfield

PS Form **3811**, December 1994 102595-99-B-0223 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

SENDER: L-00000V-00-0106

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ 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 will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:
Citizens Utilities
2901 North Central Ave #160
Phoenix AZ 85012

4a. Article Number: 7099 3220 0005 6650 6332

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: 9-21

5. Received By: *(Print Name)* Trudy Ruth

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature *(Addressee or Agent)*: Trudy Ruth

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GILA BEND SEP 21 2000

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PHOENIX, ARIZONA 85007

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USPS
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PHOENIX AZ 850 PM

• Print your name, address, and ZIP Code in this box •

ARIZONA CORPORATION COMMISSION
DOCKET CONTROL CENTER
1200 WEST WASHINGTON STREET
PHOENIX, ARIZONA 85007

AZ CORP CO
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2000 SEP 25 A 11:51
RECEIVED

SENDER: L-00000V-00-0106

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ Print your name and address on the reverse of this form so that we can return this card to you.
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- ☐ Write *"Return Receipt Requested"* on the mailpiece below the article number.
- ☐ The Return Receipt will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:
Eastern Competitive Solutions
Route 4 Box 1803
Lakeside AZ 85929

4a. Article Number: 7099 3220 0005 6650 6721

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: 9-21-00

5. Received By: *(Print Name)*

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature *(Addressee or Agent)*
Cathy McEvoy

PS Form **3811,** December 1994 102595-99-B-0223 Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER: L-00000V-00-0106

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ Print your name and address on the reverse of this form so that we can return this card to you.
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- ☐ Write *"Return Receipt Requested"* on the mailpiece below the article number.
- ☐ The Return Receipt will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:
Arizona Public Service
400 North 5th Street
Phoenix AZ 85004

4a. Article Number: 7099 3220 0005 6650 6462

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: SEP 22 2000

DOWNTOWN STA PHOENIX AZ USPS - 85004

5. Received By: *(Print Name)* Metin Oz

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature *(Addressee or Agent)*

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Phoenix, Arizona 85007-2996
AZ CORP COMMISSION
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USPS
Permit No. G-10

- Print your name, address, and ZIP Code in this box -

ARIZONA CORPORATION COMMISSION
DOCKET CONTROL CENTER
1200 WEST WASHINGTON STREET
PHOENIX, ARIZONA 85007

RECEIVED
2000 SEP 25 A 11:58
AZ CORP COMMISSION
DOCUMENT CONTROL

SENDER: L-00000V-00-0106

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
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- ☐ The Return Receipt will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

Ajo Improvement Co
Post Office Drawer 9
Ajo AZ 85321

4a. Article Number: 7099 3220 0005 6650 6349

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: 9-21-00

5. Received By: *(Print Name)* KAY F. PETERSON

6. Signature *(Addressee or Agent)* Kay F. Peterson

8. Addressee's Address *(Only if requested and fee is paid)*

PS Form 3811, December 1994 102595-99-B-0223 Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER: L-00000V-00-0106

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- ☐ The Return Receipt will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

Duncan Valley Electric Coop
PO Box 440
Duncan AZ 85534

4a. Article Number: 7099 3220 0005 6650 6554

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: SEP 22 2000

5. Received By: *(Print Name)* D Garner

6. Signature *(Addressee or Agent)* D Garner

8. Addressee's Address *(Only if requested and fee is paid)*

PS Form 3811, December 1994 102595-99-B-0223 Domestic Return Receipt

DUNCAN AZ 85534 SEP 22 2000 USPS

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AJO, AZ SEP 21 PM 12000 85321

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DOCKET CONTROL CENTER
1200 WEST WASHINGTON STREET
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UNITED STATES POSTAL SERVICE

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DUNCAN AZ SEP 22 2000 85534

• Print your name, address, and ZIP Code in this box •

ARIZONA CORPORATION COMMISSION
DOCKET CONTROL CENTER
1200 WEST WASHINGTON STREET
PHOENIX, ARIZONA 85007

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2000 SEP 25 A 11:
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17

Is your RETURN ADDRESS completed on the reverse side?

SENDER: L-00000V-00-0106

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ Print your name and address on the reverse of this form so that we can return this card to you.
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- ☐ The Return Receipt will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

Graham County Electric
PO Box Drawer B
Pima AZ 85543

4a. Article Number: 7099 3220 0005 6650 6394

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: 9-21-00

5. Received By: *(Print Name)* Tamara Brown

6. Signature *(Addressee or Agent)* Tamara Brown

8. Addressee's Address *(Only if requested and fee is paid)*

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Is your RETURN ADDRESS completed on the reverse side?

SENDER: L-00000V-00-0106

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- ☐ The Return Receipt will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

City Clerk Beverly Turner
Box A
Gila Bend AZ 85337

4a. Article Number: 7099 3220 0005 6650 6608

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: GILA BEND SEP 21 2000

5. Received By: *(Print Name)*

6. Signature *(Addressee or Agent)* Beverley Turner

8. Addressee's Address *(Only if requested and fee is paid)*

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PIMA, AZ SEP 21 PM 85543

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ARIZONA CORPORATION COMMISSION
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PHOENIX, ARIZONA 85007

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2000 SEP 25 A 11:56
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