0000048389

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:

West Valley News
200 West Wigwam Blvd
Litchfield Park AZ 85340-4636

4a. Article Number
7099 3220 0005 6650 6707

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

7. Date of Delivery
9-21

5. Received By: *(Print Name)*
Rebecca Gorraiz

6. Signature *(Addressee or Agent)*
Rebecca Gorraiz

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

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

PHOENIX AZ 850 7
PM
21 SEP 2000

First-Class Mail
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USPS
Permit No. G-10

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

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DOCKET CONTROL CENTER
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PHOENIX, ARIZONA 85007

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2000 SEP 22 A 11: 23
AZ CORP COMMISSION
DOCUMENT CONTROL

12927

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.
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- ☐ 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 Public Service
Mail Station 9905
PO Box 53999
Phoenix AZ 85072-3999

4a. Article Number: 7099 3220 0005 6650 6301

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)* Metin Oz

6. Signature *(Addressee or Agent)* [signature]

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

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:

- ☐ 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.

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:

Honorable Sandie Smith
Pinal County Board of Supervisors
575 North Idaho Road #101
Apache Junction AZ 85219

4a. Article Number: 7099 3220 0005 6650 6288

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)* Carol Kingbury

6. Signature *(Addressee or Agent)* [signature]

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

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

Is your RETURN ADDRESS completed on the reverse side?

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DOCUMENT CONTROL

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:

Honorable Mike Whalen
Mesa City Council
PO Box 1466
Mesa AZ 85211

4a. Article Number
7099 3220 0005 6650 6363

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)* Rich Engquist

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:

A. Wayne Smith
6106 South 32nd Street
Phoenix AZ 85040

4a. Article Number
7099 3220 0005 6650 6271

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

7. Date of Delivery

5. Received By: *(Print Name)*

6. Signature *(Addressee or Agent)*

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

SOUTH MOUNTAIN STATION PHOENIX AZ 85040 SEP 21 2000

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PHOENIX AZ 850 PM

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PHOENIX, ARIZONA 85007

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17

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:

Trico Electric Coop
5100 West Ina Rd
Tucson AZ 85743

4a. Article Number: 7099 3220 0005 6650 6639

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)* Karen Gonzales

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.
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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:

Jeff McGuire
PO Box 1046
Sun City AZ 85372

4a. Article Number: 7099 3220 0005 6650 6455

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

7. Date of Delivery: SUN CITY, AZ SEP 21 2000 USPS

5. Received By: *(Print Name)* Jeff McGuire

6. Signature *(Addressee or Agent)*

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

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PHOENIX, ARIZONA 85007

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UNITED STATES POSTAL SERVICE

PHOENIX AZ 650
PM
21 SEP 2000

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USPS
Permit No. G-10

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PHOENIX, ARIZONA 85007

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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:

Sierra Southwest Electric Coop
3900 East Broadway
Tucson AZ 85711

4a. Article Number: 7099 3220 0005 6650 6523

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)*: LaRee Lem

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

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

3. Article Addressed to:

KWH Metering
405 East Wetmore #117-513
Tucson AZ 85705

4a. Article Number: 7099 3220 0005 6650 6578

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)* PRAVINA PATEL

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

6. Signature *(Addressee or Agent)*: Pravina Patel

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

AZ CORP COMMISSION
DOCUMENT CONTROL

2000 SEP 22 A 11:23

RECEIVED

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:

Buckeye Valley News
122 South 4th Street
Buckeye AZ 85326

4a. Article Number: 7099 3220 0005 6650 6790

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)* Sharon Butler

6. Signature *(Addressee or Agent)* Sharon Butler

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

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

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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:

Salt River Project
Mail Station PAB 221
PO Box 52025
Phoenix AZ 85072-2025

4a. Article Number: 7099 3220 0005 6650 6318

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)* M. Pfister

6. Signature *(Addressee or Agent)* Michael H. Pfister

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.

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1200 WEST WASHINGTON STREET
PHOENIX, ARIZONA 85007

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