



0000060514

COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

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.

A. Received by (Please Print Clearly) B. Date of Delivery
M. Palmer JUL 23 2001
C. Signature X [Signature] Agent Addressee
D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

L-0000AA-01-0116

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.
4. Restricted Delivery? (Extra Fee) Yes

Article Number (Copy from service label)
7099 3400 0018 2489 8781
PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-09

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:
Mr. Mike Palmer
604 Howland
Bisbee AZ 85603

2. Article Number (Copy from service label)
7099 3400 0018 2489 8789
PS Form 3811, July 1999 Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

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.

A. Received by (Please Print Clearly) B. Date of Delivery
KAE ESTES 7-23-01
C. Signature X [Signature] Agent Addressee
D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

L-0000AA-01-0116

Yam County Electric
Box Drawer B
AZ 85543

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.
4. Restricted Delivery? (Extra Fee) Yes

Article Number (Copy from service label)
7099 3400 0018 2489 8712
PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

C. Signature
X [Signature] Agent Addressee
D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:
100000AA010116

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.
4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

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.

A. Received by (Please Print Clearly) B. Date of Delivery
Larry Burke JUL 23 2001
C. Signature X [Signature] Agent Addressee
D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

L-0000AA-01-0116

Honorable Mike Whalen
Mesa City Council
20 E Main St., Suite 750
Mesa AZ 85211

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.
4. Restricted Delivery? (Extra Fee) Yes

Article Number (Copy from service label)
7099 3400 0018 2489 9580
PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

102595-00-M-0952