316

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:
Lance J.M. Steinhart
1720 Windward Concourse, Ste. 250
Alpharetta, GA 30005

RECEIVED
2003 OCT -6 A 10: 50
AZ CORP COMMISSION
DOCUMENT CONTROL

2. Article Number
7188 4442 0100 0000 2573

3. Service Type ☒ **CERTIFIED**

Date of Delivery
SEP. 30 2003

Received By: (Print Name)
Jerrie Burton

Signature - (Addressee or Agent)

Enter delivery address if different than item 1.

~~T-04063A-01-0875~~

PS Form 3811 **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE

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

Arizona Corporation Commission
1200 West Washington - Hrg. Div./Docket
Phoenix, Arizona 85007-2996

7188 4442 0100 0000 2573

RETURN RECEIPT SERVICE

POSTAGE	$0.37
RESTRICTED DELIVERY FEE	$0.00
CERTIFIED FEE	$2.30
RETURN RECEIPT FEE	$1.75
TOTAL POSTAGE AND FEE	$4.42

POSTMARK OR DATE

SENT TO:
Lance J.M. Steinhart
1720 Windward Concourse, Ste. 250
Alpharetta, GA 30005

~~T-04063A-01-0875~~

PS FORM 3800 **UNITED STATES POSTAL SERVICE**

RECEIPT FOR CERTIFIED MAIL
NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL
(SEE OTHER SIDE)

0000070352