0000070864

RETURN RECEIPT SERVICE		POSTMARK OR DATE
	POSTAGE	$ 0.37
	RESTRICTED DELIVERY FEE	$ 0.00
	CERTIFIED FEE	$ 2.30
	RETURN RECEIPT FEE	$ 1.75
	TOTAL POSTAGE AND FEE	$ 4.42

SENT TO:

Robert W. Geake
Arizona Water Company
P. O. Box 29006
Phoenix, AZ 85038-9006

PS FORM 3800 *W-01445A-02-0619*

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

UNITED STATES POSTAL SERVICE

7180 5335 1300 0000 9641

UNITED STATES POSTAL SERVICE

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

OCT 2 9 2002

DOCKETED

AZ CORP COMMISSION
DOCUMENT CONTROL

2002 OCT 29 A 10:45

RECEIVED

Arizona Corp. Commission
Docket Control
1200 W. Washington St
85007-2996

51G

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:

Robert W. Geake
Arizona Water Company
P. O. Box 29006
Phoenix, AZ 85038-9006

2. Article Number

7180 5335 1300 0000 9641

3. Service Type ☒ **CERTIFIED**

Date of Delivery

OCT 2 5 2002

Received By: (Print Name)

Danette

Signature - (Addressee or Agent)

Enter delivery address if different than item 1.

PS Form 3811 *W-01445A-02-0619*

DOMESTIC RETURN RECEIPT