

516

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:
Bruce E. Blumberg
45 W. Jefferson, Ste. 210
Phoenix, AZ 85003-2325

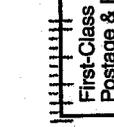
2. 
 7188 4442 0100 0000 2689

3. Service Type **CERTIFIED**
 Date of Delivery *10-16*

Received By: (Print Name) *[Signature]*
 Signature - (Addressee or Agent) *Amber Leeseberg*

Enter delivery address if different than item 1.

PS Form 3811 **S-03530A-03-0000** **DOMESTIC RETURN RECEIPT**

UNITED STATES POSTAL SERVICE   **First-Class Mail Postage & Fees Paid USPS Permit No. G-10**

RECEIVED

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

