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1 STATE OF ARIZONA)
2 County of Maricopa)

AFFIDAVIT OF SERVICE

S-03364A-02-0000 JUL - 8 A 10: 51

AZ CORP COMMISSION
DISCLOSE AT

3
4 I, Stan Tadlock, for the Securities Division of the Arizona Corporation Commission, hereby certify
5 that I am not less than 18 years of age, and that on the 25th day of June 2002, a copy of a
6 **NOTICE OF OPPORTUNITY FOR HEARING REGARDING PROPOSED ORDER TO**
7 **CEASE AND DESIST, FOR RESTITUTION AND ORDER FOR ADMINISTRATIVE**
8 **PENALTY** in the matter of the Arizona Corporation Commission Docket No. S-03364A-02-0000
9 was served upon Carl Woodard by mailing a copy of the notice in an envelope addressed to his
10 attorney, Garry N. Keister, Golston Keister & Steen, P.C., 4500 S. Lakeshore Drive, Suite 570,
11 Tempe, AZ 85282-7057, via US Certified Mail # 7001 2510 0007 9662 9274, return receipt
12 requested. On June 27, 2002, US Post Office form 3811 (return receipt) was returned, a copy
13 herein attached.

Stan Tadlock
AFFIANT (Signature)

7/8/02
DATE

SUBSCRIBED AND SWORN TO BEFORE me this 7th day of July,
2002.

Garry Kirst
NOTARY PUBLIC (Signature)

22 My Commission Expires:

23  Notary Public State of Arizona
24 Maricopa County
Gary J Kirst
Expires September 10, 2004

Arizona Corporation Commission
DOCKETED

JUL - 8 2002

DOCKETED BY CM

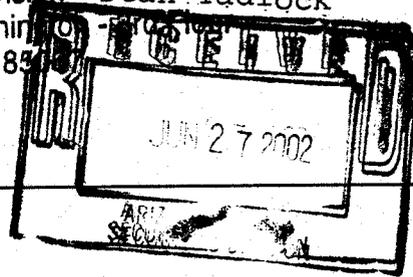
UNITED STATES POSTAL SERVICE



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

• Sender: Please print your name, address, and ZIP+4 in this box •

Arizona Corporation Commission
Securities Division - Stan Tadlock
1300 W. Washington
Phoenix, AZ 85003



SENDER: COMPLETE THIS SECTION

- 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.

1. Article Addressed to:

Garry N. Keister
Golston Keister & Steen, P.C.
4500 S. Lakeshore Drive, Suite 570
Tempe, AZ 85282-7057

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

K. MAUSOLF 6-25-02

C. Signature

X K. MAUSOLF

- Agent
 Addressee

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type

- Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

7001 2510 0007 9662 9274