

ORIGINAL



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Docket No. S-20857A-12-0411

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2 STATE OF ARIZONA )  
3 County of Maricopa )

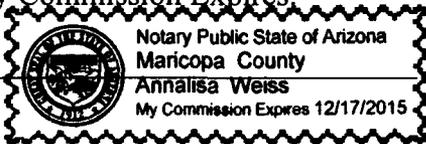
**AFFIDAVIT OF SERVICE**

4  
5 I, DuLance Morin, for the Securities Division of the Arizona Corporation Commission, hereby  
6 certify that on the 1<sup>st</sup> day of October, 2012 at approximately 2:00 pm, I mailed a certified copy of a  
7 Notice of Opportunity for Hearing, Docket No. S-20857A-12-0411 via USPS certified  
8 mail, to Tasha Trent Dahl at 3541 N Canyon Wash Circle, Mesa, AZ 85207. On the 3<sup>rd</sup> of October,  
9 2012, at approximately 1:25 pm, the Notice of Opportunity for Hearing, Docket No. S-20857A-12-  
10 0411 was served and signed for upon delivery at the 3541 N Canyon Wash Circle address.

11  
12  10/10/12  
13 AFFIANT DATE

14  
15 SUBSCRIBED AND SWORN TO BEFORE me this 10th day of October  
16 2012

17  
18   
19 NOTARY PUBLIC

20 My Commission Expires:  
21 

22 Arizona Corporation Commission  
23 DOCKETED  
24 OCT 10 2012

25 DOCKETED BY 

26  
RECEIVED  
2012 OCT 10 A 10:32  
AZ CORP COMMISSION  
DOCKET CONTROL

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature <input checked="" type="checkbox"/> Agent  <input type="checkbox"/> Addressee	
1. Article Addressed to: <i>Tasha Trent Dahl</i> <i>3541 N Canyon Wash Circle</i> <i>Mesa AZ 85209</i>	B. Received by (Printed Name)	C. Date of Delivery
2. Article Number <i>(Transfer from service label)</i>	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

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