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 DISTRICT OF ARIZONA
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature <input checked="" type="checkbox"/> Mike Phillips <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <input type="checkbox"/> Date of Delivery <i>Michael Phillips</i> JUL - 9 2007 <small>Address differs from address on label</small> <input type="checkbox"/> Yes <small>YES, enter delivery address below:</small> <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Arizona Attorney General Office of the AZ Attorney General 1275 W. Washington Phoenix, AZ 85007</p> <p><i>CV 07-959-PHX-RGC (LOA)</i> <i>pet/ord</i></p>	<p>RECEIVED</p> <p>JUL 10 2007</p> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number <small>(Transfer from service label)</small></p>	<p>7005 1160 0003 7550 1555</p>
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	