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 JUN 20 2007
 CLERK U S DISTRICT COURT
 DISTRICT OF ARIZONA
 BY _____ S. DEPUTY

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"/> <i>Boyer</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery <i>Boyer</i> 6/18</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If <input checked="" type="checkbox"/> Yes, enter delivery address below: <input type="checkbox"/> No</p> <p style="text-align: center; font-size: 2em; font-weight: bold;">RECEIVED</p> <p style="text-align: center;">JUN 20 2007</p>
<p>1. Article Addressed to:</p> <p>Civil Process Clerk U.S. Attorney's Office, Dist. of AZ 40 N. Central Avenue, Suite 1200 Phoenix, AZ 85004-4408</p>	<p>3. Service Type <input checked="" type="checkbox"/> Registered Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number (Transfer from service label) 07-779</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>7007 0710 0001 8320 2514</p>	
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	