No. _____

_____

IN THE

SUPREME COURT OF THE UNITED STATES

_____

Phillip Lee Carson — PETITIONER
(Your Name)

VS.

David Shinn, Director; et al., — RESPONDENT(S)

PROOF OF SERVICE

I, Phillip Lee Carson, do swear or declare that on this date, June, 2021, as required by Supreme Court Rule 29 I have served the enclosed MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS* and PETITION FOR A WRIT OF CERTIORARI on each party to the above proceeding or that party's counsel, and on every other person required to be served, by depositing an envelope containing the above documents in the United States mail properly addressed to each of them and with first-class postage prepaid, or by delivery to a third-party commercial carrier for delivery within 3 calendar days.

The names and addresses of those served are as follows:

Attorney Generals Office, State of Arizona, Mark Brnovich, Attorney General, Eric Knobloch, Assistant Attorney General, 2005 North Central Avenue, Phoenix, Arizona, 85004-1580, Counsel for David Shinn; et al.,

I declare under penalty of perjury that the foregoing is true and correct.

Executed on June 02, 2021

(Signature)

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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. 06.02.2021

1. Article Addressed to: Mark Brnovich Attorney General

Attorney Generals office
State of Arizona
Eric Knoblock
Assistant Attorney General
2005 N. Central Ave., Phoenix, AZ 85004-1580

9590 9402 2006 6123 7154 52

2. Article Number (Transfer from service label)

7018 3090 0001 0812 2293

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

RECEIVED

JUN 07 2021

AZ ATTO... EY ... AL

PALM BUIL...

3. Service Type

☐ Adult Signature
☐ Adult Signature Restricted Delivery
☑ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over $500)

☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☑ Return Receipt for Merchandise
☑ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

7018 3090 0001 0812 2293

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at *www.usps.com®*.

OFFICIAL USE

Certified Mail Fee $ 1.00	
Extra Services & Fees (check box, add fee as appropriate)	
☑ Return Receipt (hardcopy) $ 2.85	
☐ Return Receipt (electronic) $	Postmark Here
☐ Certified Mail Restricted Delivery $	5213 L Carson
☑ Adult Signature Required $ 12.40	
☐ Adult Signature Restricted Delivery $	
Postage $	
Total Postage and Fees $ 18.95	

writ Certiorari 22 pgs

Sent To Mark Brnovich Attorney General, Eric Knoblock AAG, Attorney Generals office, State of Arizona

Street and Apt. No., or PO Box No. 2005 N. Central Ave.

City, State, ZIP+4® Phoenix, AZ 85004-1580

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

ARIZONA DEPARTMENT OF CORRECTIONS

Inmate Request for Withdrawal - Internal Legal Mail X (1)

Use BLACK INK only

USDC9 NO. 20-16548

INMATE NAME (Last, First M.I.) (Please print)	ADC NUMBER	INSTITUTION/UNIT
carson, phillip L	091914	5213 L A-14

AMOUNT	REASON (Please provide documentation, as applicable)
$	LEGAL MAIL 72 pgs. Mark Brnovich, Eric Knobloch Attorney General Office 2005 N. Central Ave. Phx. AZ 85004-1580

INMATE SIGNATURE	DATE (mm/dd/yyyy)
[signature]	06.02.2021

DISPOSITION 7018 3090 0001 0812 2293

CO III OR DESIGNEE NAME (Last, First M.I.) (Please print)	TITLE
[signature]	C-II

SPENDABLE BALANCE	DOCUMENTATION PROVIDED/VERIFIED? ☐ Yes ☐ No If yes, what type?
$	

☐ Approved ☐ Disapproved	PLEASE PROVIDE COMMENTS IF DISAPPROVED

SIGNATURE	DATE (mm/dd/yyyy)
[signature]	6/2/21

Distribution: White - Inmate Banking
Canary – CO III
Pink - Inmate

Cert. Reg. # 7018 3090 0001 0812 2293

905-1
11/16/17

4/5

ARIZONA DEPARTMENT OF CORRECTIONS

Inmate Request for Withdrawal - Internal Legal Mail × (1)

Use BLACK INK only

USDC9 No. 20-16548

INMATE NAME (Last, First M.I.) (Please print)	ADC NUMBER	INSTITUTION/UNIT
Carson, Phillip L.	091914	5613L, A-14

AMOUNT	REASON (Please provide documentation, as applicable)
$	Certiorari, etc. LEGAL POSTAGE Amicus? Law office Michael P. Denan 3200 N. Central Ste 1500 Phx, AZ 85012

INMATE SIGNATURE	DATE (mm/dd/yyyy)
[signature]	06-04-2021

DISPOSITION

CO III OR DESIGNEE NAME (Last, First M.I.) (Please print)	TITLE
Maldonado	Cos

SPENDABLE BALANCE	DOCUMENTATION PROVIDED/VERIFIED? ☐ Yes ☐ No If yes, what type?
$	

☐ Approved ☐ Disapproved	PLEASE PROVIDE COMMENTS IF DISAPPROVED

SIGNATURE	DATE (mm/dd/yyyy)
[signature]	06-04-2021

Distribution: White - Inmate Banking
Canary – CO III
Pink - Inmate

905-1
11/16/17

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