

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

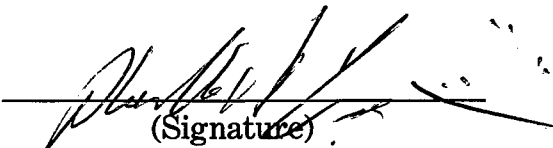
I, Phillip Lee Carson, do swear or declare that on this date, June, 2021, as required by Supreme Court Rule 29 I have served the enclosed MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS* and PETITION FOR A WRIT OF CERTIORARI on each party to the above proceeding or that party's counsel, and on every other 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 General's 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 THIS SECTION ON DELIVERY	
■ 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. <i>06-02-2021</i>		Signature <i>X</i> ☐ Agent ☐ Addressee	
1. Article Addressed to: <i>Mark Brnovich</i> <i>Attorney General</i> <i>Attorney General's Office</i> <i>State of Arizona</i> <i>Eric Knudsen</i> <i>Assistant Attorney General</i> <i>2005 N. Central Ave., Phoenix, AZ 85004-1580</i>		B: Received by (Printed Name) _____ C: Date of Delivery _____	
2. Article Number (Transfer from service label) <i>7018 3090 0001 0812 2293</i>		D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: _____ RECEIVED JUN 07 2021 AZ ATTO GEN AL	
3. Service Type <i>PALM BUILD</i> ☐ 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	

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☒ Adult Signature Required	\$ <i>12.40</i>
☐ Adult Signature Restricted Delivery	\$ _____
Postage	\$ _____
Total Postage and Fees	\$ <i>18.95</i>
Sent To <i>Mark Brnovich Attorney General, Eric Knudsen</i> <i>AG, Attorney General's Office, State of Arizona</i> Street and Apt. No. or PO Box No. _____ <i>2005 N. Central Ave.</i> City, State, ZIP+4® <i>Phoenix, AZ 85004-1580</i>	

Postmark Here
5213 L Carson

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 X①

Use BLACK INK only

USD C9 NO. 20-16548

INMATE NAME (Last, First M.I.) (Please print) Carson, Phillip L		ADC NUMBER 091914	INSTITUTION/UNIT 5213 L A-14
AMOUNT \$	REASON (Please provide documentation, as applicable) LEGAL MAIL		Mark Brown, Eric Knobloch Attorney General Office 2005 N. Central Ave. Phoenix, AZ 85004
INMATE SIGNATURE <i>Phillip L Carson</i>		DATE (mm/dd/yyyy) 06.02.2021	

DISPOSITION

7018 3090 0001 0812 2293

CO III OR DESIGNEE NAME (Last, First M.I.) (Please print) Carson		TITLE Cell	
SPENDABLE BALANCE \$	DOCUMENTATION PROVIDED/VERIFIED? ☐ Yes ☐ No If yes, what type?		
☐ Approved ☐ Disapproved	PLEASE PROVIDE COMMENTS IF DISAPPROVED		
SIGNATURE <i>Phillip L Carson</i>		DATE (mm/dd/yyyy) 6/2/21	

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

Cert. Reg. # 7018 3090 0001 0812 2293

905-1
11/16/17

ARIZONA DEPARTMENT OF CORRECTIONS

Inmate Request for Withdrawal - Internal

Use BLACK INK only.

Legal
Mail X ①

USDC 9 No. 20-16548

INMATE NAME (Last, First M.I.) (Please print) Carson, Phillip L		ADC NUMBER 091914	INSTITUTION/UNIT 5C13L, A-14
AMOUNT \$	REASON (Please provide documentation, as applicable) LEGAL POSTAGE		
INMATE SIGNATURE <i>Phillip L Carson</i>		DATE (mm/dd/yyyy) 06-03-2021	

DISPOSITION

CO. III OR DESIGNEE NAME (Last, First M.I.) (Please print) Maldonado		TITLE Cox	
SPENDABLE BALANCE \$	DOCUMENTATION PROVIDED/VERIFIED? ☐ Yes ☐ No If yes, what type?		
☐ Approved ☐ Disapproved	PLEASE PROVIDE COMMENTS IF DISAPPROVED		
SIGNATURE <i>[Signature]</i>		DATE (mm/dd/yyyy) 06-04-2021	

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

905-1
11/16/17