

SUPERIOR COURT ✓  
YAVAPAI COUNTY, ARIZONA

2010 SEP 22 PM 3:57

JEROME RICKS, CLERK

BY: S. KELBAUGH

1 J. Jeffrey Coughlin (013801)  
2 **J. JEFFREY COUGHLIN PLLC**  
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4 Prescott, Arizona 86303  
5 Telephone: (928) 445-7137  
6 Facsimile: (866) 890-8989  
7 j.coughlin@azbar.org  
8 Attorney for Plaintiffs

9 IN THE SUPERIOR COURT FOR THE STATE OF ARIZONA  
10 IN AND FOR THE COUNTY OF YAVAPAI

11 JOHN B. CUNDIFF and BARBARA C.  
12 CUNDIFF, husband and wife; ELIZABETH  
13 NASH, a married woman dealing with her  
14 separate property; KENNETH PAGE and  
15 KATHRYN PAGE, as Trustee of the Kenneth  
16 Page and Catherine Page Trust,

17 Plaintiffs,

18 vs.

19 DONALD COX and CATHERINE COX,  
20 husband and wife,

21 Defendants.

CASE NO. P1300CV20030399

**AFFIDAVIT OF SERVICE**

22 STATE OF ARIZONA )  
23 ) ss.  
24 County of Yavapai )

25 J. JEFFREY COUGHLIN, being first duly sworn, upon oath, deposes and says:

1. The following parties being served are known to be located inside or outside of  
the state:

<u>Party</u>	<u>Parcel No.</u>	<u>Date of Delivery</u>
Humberto and Ana Pimentel	10301060K	9/21/2010
Masumi Gavinski	40101005V	9/21/2010
Gregory and Patricia Johnson	10301077G	9/21/2010

1 William E. Probst

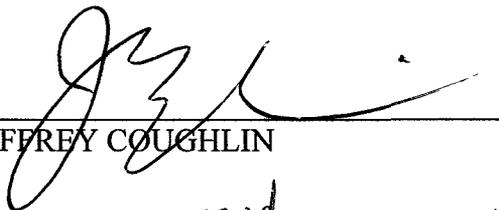
40101036A

9/21/2010

2 2. The summons, a copy of this Court's Notice and the First Amended Complaint  
3 with attached Declaration of Restrictions were mailed via Certified Mail to the parties above.

4 3. The summons, a copy of this Court's Notice and the First Amended Complaint  
5 with attached Declaration of Restrictions were received by the above parties as evidenced by the  
6 receipts, copies of which are attached to this affidavit.

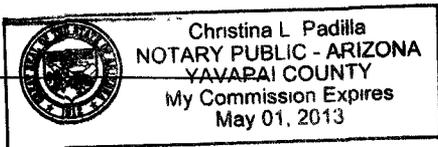
7 4. The date of receipt by each party is listed above. The receipts were returned to me  
8 on September 22, 2010.  
9

10  
11   
12 J. JEFFREY COUGHLIN

13 SUBSCRIBED AND SWORN to before me this 22nd day of Sept, 2010.

14   
15 Christina L. Padilla  
16 Notary Public

17 My commission expires:



19  
20 COPY of the foregoing  
21 mailed this 22nd day of  
22 Sept, 2010 to:

23 Jeffrey R. Adams  
24 ADAMS & MULL, PLLC  
25 211 East Sheldon Street  
Prescott, AZ 86301  
Attorneys for Defendants

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William "Bill" Jensen  
2428 West Coronado Ave.  
Flagstaff, AZ 86001  
Pro Per

Hans Clugston  
HANS CLUGSTON, PLLC  
1042 Willow Creek Road  
Suite A101-PMB 502  
Prescott, AZ 86301  
Attorney for Margaret Kizlowski and Northern  
Arizona Fiduciaries, Inc.

By: C. Padilla

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>	<p>A. Signature  <input checked="" type="checkbox"/> <i>[Signature]</i> <input type="checkbox"/> Agent  <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>ANA Pimentel</i> C. Date of Delivery <i>9-21-10</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Humberto and Ana Pimentel          8419 E. Tracy Drive          Prescott Valley, AZ 86314</p> <p style="font-size: 2em; font-weight: bold; text-align: center;">10301060K</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 checked="" type="checkbox"/> Yes</p>
<p>2. Article Number <i>7009 2820 0003 7607 8436</i>          (Transfer from service label)</p>	
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	

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>	<p>A. Signature  <input checked="" type="checkbox"/> <i>[Signature]</i> <input type="checkbox"/> Agent  <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Masumi Gavinski</i> C. Date of Delivery <i>9/21/2010</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Masumi Gavinski          P.O. Box 27377          Prescott Valley, AZ 86314</p> <p style="font-size: 2em; font-weight: bold; text-align: center;">40101005K</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 <i>7009 2820 0003 7607 7903</i>          (Transfer from service label)</p>	
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	

**SENDER: COMPLETE THIS SECTION**

- 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.

1. Article Addressed to:

Gregory A. and Patricia M. Johnson  
8700 Morrow Way  
Prescott Valley, AZ 86315

10301077G

2. Article Number  
(Transfer from service)

7009 2820 0003 7607 8559

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*X M Johnson*

- Agent  
 Addressee

B. Received by (Printed Name)

Greg Johnson

C. Date of Delivery

9-21-10

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

3. Service Type

- Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

**SENDER: COMPLETE THIS SECTION**

- 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.

1. Article Addressed to:

William E. Probst  
9440 E. Far Away Place  
Prescott Valley, AZ 86315

401 01036A

2. Article Number  
(Transfer from service label)

7009 2820 0003 7607 7873

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*X William E Probst*

- Agent  
 Addressee

B. Received by (Printed Name)

W

C. Date of Delivery

9-21-10

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

3. Service Type

- Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes