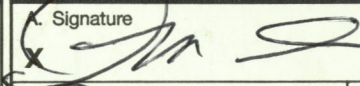


EXCELSIOR MINING ARIZONA, LLC UICAPPEAL NO. 18-03

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 type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>D. MONTANEZ</u> C. Date of Delivery <u>5/6/18</u></p>
<p>1. Article Addressed to:</p> <p>Rebecca A. Sawyer Vice President, Sustainability Excelsior Mining Arizona, Inc. Concord Place, Suite 300 2999 North 44th Street Phoenix, AZ 85018</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input 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 (Transfer from service label)</p>	<p><u>7008 3230 0000 9457 2316</u></p>

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

EXCELSIOR MINING ARIZONA, INC. UICAPPEAL NO. 18-03

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rebecca A. Sawyer
Vice President, Sustainability
Excelsior Mining Arizona, Inc.
Concord Place, Suite 300
2999 North 44th Street
Phoenix, AZ 85018

COMPLETE THIS SECTION ON DELIVERY

A. Signature  Agent
 Addressee

B. Received by (Printed Name) D. MONTANEZ C. Date of Delivery 5/16/18

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number

(Transfer from service label)

7008 3230 0000 9457 2316