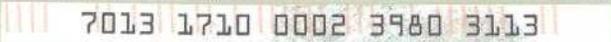


SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X <i>Jess L. Witt</i>	
1. Article Addressed to:	B. Received by (<i>Printed Name</i>) <i>Jessica L. Witt</i>	C. Date of Delivery <i>9/18/14</i>
Albert P. Barker Barker Rosholt & Simpson LLP 1010 W. Jefferson, Ste 102 Boise, ID 83702	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (<i>Transfer from service label</i>)	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.	
	4. Restricted Delivery? (<i>Extra Fee</i>) <input type="checkbox"/> Yes <div style="text-align: center;">  7013 1710 0002 3980 3113 </div>	
PS Form 3811, February 2004	Domestic Return Receipt	102595-02-M-1540