

U.S. Postal Service
CERTIFIED MAIL RECEIPT

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OFFICIAL USE

7008 3230 0003 0729 6879

Postage	\$	Postmark Here 2/17/2010
Certified Fee		
Return Receipt Fee <small>(Endorsement Required)</small>		
Restricted Delivery Fee <small>(Endorsement Required)</small>		
Total Postage & Fees	\$	

Sent To: **Martin K. Banks**
 Street, Apt. or PO Box: **Stovel, Rives, LLP,**
 City, State: **201 S. Main Street, Suite 1100**
Salt Lake City, UT 84111

Docket No.: CWA-08-2009-0035

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 checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee <i>[Signature]</i></p> <p>B. Received by (Printed Name) <i>[Signature]</i></p> <p>C. Date of Delivery FEB 17 2010</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>Martin K. Banks Stovel, Rives, LLP, 201 S. Main Street, Suite 1100 Salt Lake City, UT 84111</p> <p>Docket No.: CWA-08-2009-0035</p>	<p>2. Service Type</p> <p><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>3. Article Number (Transfer from service label)</p>	<p>4. Restricted Delivery? Extra Fee: <input type="checkbox"/> Yes</p>
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