TED STATES POSTAL SERVICE

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

DIVISION
OF
OIL GAS & MINING
1594 W NORTH TEMPLE STE 1210
BOX 145801
SALT LAKE CITY UT 84114-5801

RECEIVED
JUN 14 2000
DIVISION OF
OIL, GAS AND MINING

**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:

GARY APPLEGATE
INDIAN QUEEN MARBLE LLC
1275 N MAIN
TOOELE UT 84074

*COMPLETE THIS SECTION ON DELIVERY*

A. Received by *(Please Print Clearly)*

B. Date of Delivery

C. Signature

X

☐ Agent
☐ Addressee

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

JUN 13 2000

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 *(Copy from service label)*
7000 0520 0021 7582 9279

PS Form 3811, July 1999 Domestic Return Receipt 102595-99-M-1789

U.S. Postal Service
**CERTIFIED MAIL RECEIPT**
*(Domestic Mail Only; No Insurance Coverage Provided)*

JB DOGM M/001/019 6/12/2001

| | |
|---|---|
| Postage | $ |
| Certified Fee | |
| Return Receipt Fee (Endorsement Required) | |
| Restricted Delivery Fee (Endorsement Required) | |
| Total Postage & Fees | $ |

Postmark Here

*Recipient's Name (Please Print Clearly) (To be completed by mailer)*
GARY APPLEGATE INDIAN QUEEN MARBLE
*Street, Apt. No.; or PO Box No.*
1275 N MAIN
*City, State, ZIP+ 4*
TOOELE UT 84074

PS Form 3800, February 2000 See Reverse for Instructions

7000 0520 0021 7582 9279

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