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 BOWN
BONNEVILLE QUARRIES INC
842 W 400 N
WEST BOUNTIFUL UT 84087

JB DOGM M/003/016 6/24/05

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Tristina Bown
☐ Agent
☐ Addressee

B. Received by (*Printed Name*) Tristina Bown

C. Date of Delivery 6/29/05

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

USPS BOUNTIFUL UT 84010 7 JUN 29 2005

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*) 7002 0510 0003 8603 3370

PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-1540

7002 0510 0003 8603 3370

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

JB DOGM M/003/016 6/24/05 OFFICIAL USE

Postage	$ CO - MC-05-01-07(1)
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

Postmark Here

Sent To WILLIAM BOWN - BONNEVILLE QUARRIES
Street, Apt. No.; or PO Box No. 842 W 400 N
City, State, ZIP+4 WEST BOUNTIFUL UT 84087

PS Form 3800, January 2001 See Reverse for Instructions