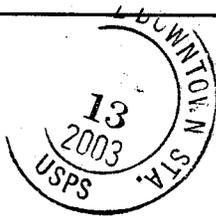




RETURN RECEIPT SERVICE	POSTAGE	\$ 0.37	POSTMARK OR DATE
	RESTRICTED DELIVERY FEE	\$ 0.00	
	CERTIFIED FEE	\$ 2.30	
	RETURN RECEIPT FEE	\$ 1.75	
SENT TO:	TOTAL POSTAGE AND FEE	\$ 4.42	

David Nuffer
SNOW NUFFER
P.O. Box 400
St. George, UT 84771



PS FORM 3800 W-04154A-02-0848



RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL
(SEE OTHER SIDE)

UNITED STATES POSTAL SERVICE

RECEIVED

2003 AUG 21 11:05

Arizona Corporation Commission
1200 W. Washington
Phoenix, AZ 85007

DOCUMENT CONTROL

Office?

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

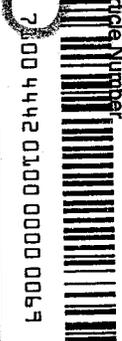


- SENDER:**
- Complete items 1, 2 and 3.
 - Indicate if restricted delivery is desired.
 - Print your name and address on the reverse of this form so that we can return this card to you.
 - Attach this form to the front of the mailpiece, or on the back if space does not permit.
 - Write "Return Receipt Requested" on the mailpiece below the article number.
 - The Return Receipt Fee will provide you the signature of the person delivered to and the date of delivery.

1. Article Addressed to:

David Nuffer
SNOW NUFFER
P.O. Box 400
St. George, UT 84771

RECEIVED



I also wish to receive the following service (for an extra fee):
 Restricted Delivery
 Consult postmaster for fee.

2. Article Number

AUG 20 2003

3. Service Type

CERTIFIED

AZ CORPORATION COMM
DIRECTOR OF UTILIT

Date of Delivery

Enter delivery address different than item 1.

Received By: (Print Name)

Brett Wade

Signature (Addressee or Agent)

Brett Wade

PS Form 3811 W-04154A-02-0848

DOMESTIC RETURN RECEIPT