

ARIZONA CORPORATION  
COMMISSION UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL - MAKE CHANGES AS NECESSARY

W-04249A

KACY J PARKER

JARVIS CORNER WATER

PAYSON AZ 85547

RECEIVED

SEP 28 2015

ACC UTILITIES DIRECTOR

ANNUAL REPORT

Water

FOR YEAR ENDING

| 12 | 31 | 2014 |

FOR COMMISSION USE

| ANN 04 | 2014 |

9-29-15

**COMPANY INFORMATION**

<b>Company Name (Business Name)</b> <u>Jakes Corner Water System</u>		
Mailing Address <u>P.O. Box 3077</u>		
<u>Payson</u>	<u>Arizona</u>	<u>85541</u>
<small>(City)</small>	<small>(State)</small>	<small>(Zip)</small>
<u>928-363-0032</u>		
<small>Telephone No. (Include Area Code)</small>	<small>Fax No. (Include Area Code)</small>	<small>Cell No. (Include Area Code)</small>
Email Address _____		
<b>Local Office Mailing Address</b> _____		
<small>(Street)</small>		
<small>(City)</small>	<small>(State)</small>	<small>(Zip)</small>
<small>Local Office Telephone No. (Include Area Code)</small>	<small>Fax No. (Include Area Code)</small>	<small>Cell No. (Include Area Code)</small>
Email Address _____		

**MANAGEMENT INFORMATION**

<b>D Regulatory Contact:</b>			
<b>D Management Contact:</b>		<u>Michael Armstead / Kacy Parker</u>	<u>CEO</u>
	<small>(Name)</small>		<small>(Title)</small>
<u>211 W. Saddle Lane</u>	<u>Payson</u>	<u>Arizona</u>	<u>85541</u>
<small>(Street)</small>	<small>(City)</small>	<small>(State)</small>	<small>(Zip)</small>
<u>928-363-0032</u>			
<small>Telephone No. (Include Area Code)</small>	<small>Fax No. (Include Area Code)</small>	<small>Cell No. (Include Area Code)</small>	
Email Address _____			
<b>On Site Manager:</b>			
	<u>Michael Armstead</u>		
	<small>(Name)</small>		
<u>211 W. Saddle Lane</u>	<u>Payson</u>	<u>Arizona</u>	<u>85541</u>
<small>(Street)</small>	<small>(City)</small>	<small>(State)</small>	<small>(Zip)</small>
<u>928-363-0032</u>			
<small>Telephone No. (Include Area Code)</small>	<small>Fax No. (Include Area Code)</small>	<small>Cell No. (Include Area Code)</small>	
Email Address _____			

**Statutory Agent:**

**Michael Armstead**  
(Name)

211 W. Saddle Lane  
(Street)

Payson  
(City)

Arizona

85541

(State)

(Zip)

928-363-3200

Telephone No. (Include Area Code)

Fax No. (Include Area Code)

Cell No. (Include Area Code)

**Attorney: N/A**

(Name)

(Street)

(City)

(State)

(Zip)

Telephone No. (Include Area Code)

Fax No. (Include Area Code)

Cell No. (Include Area Code)

Email Address

**OWNERSHIP INFORMATION**

Check the following box that applies to your company:

Sole Proprietor (S)

C Corporation (C) (Other than Association/Co-op)

Partnership (P)

Subchapter S Corporation (Z)

Bankruptcy (B)

Association/Co-op (A)

Receivership (R)

Limited Liability Company

Other (Describe)

**COUNTIES SERVED**

Check the box below for the county/ies in which you are certificated to provide service:

APACHE

COCHISE

COCONINO

GILA

GRAHAM

GREENLEE

LA PAZ

MARICOPA

MOHAVE

NAVAJO

PIMA

PINAL

SANTA CRUZ

YAVAPAI

YUMA

STATEWIDE

COMPANY NAME JAKES CORNER WATER SYSTEM

UTILITY PLANT IN SERVICE

Acct. No.	DESCRIPTION	Original Cost (OC)	Accumulated Depreciation (AD)	O.C.L.D. (C less AD)
301	Organization	3,600.00	0	3,600.00
302	Franchises			
303	Land and Land Rights			
304	Structures and Improvements			
307	Wells and Springs	15,000.00	0	15,000.00
311	Pumping Equipment	5,000.00	0	5,000.00
320	Water Treatment Equipment			
320.1	Water Treatment Plants			
320.2	Solution Chemical Feeders			
330	Distribution Reservoirs and Standpipes			
330.1	Storage Tanks			
330.2	Pressure Tanks			
331	Transmission and Distribution Mains			
333	Services			
334	Meters and Meter Installations			
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
340.1	Computers & Software			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	<b>TOTALS</b>	<b>\$23,600.00</b>		<b>23,600</b>

This amount goes on the Balance Sheet Acct. No. 108

<b>COMPANY NAME</b>	<b>JAKES CORNER WATER SYSTEM</b>
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**CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR**

<b>Acct. No.</b>	<b>DESCRIPTION</b>	<b>Original Cost (1)</b>	<b>Depreciation Percentage (2)</b>	<b>Depreciation EXPENSE (1x2)</b>
301	Organization	2,600.00		
302	Franchises			0
303	Land and Land Rights			
304	Structures and Improvements			
307	Wells and Springs	15,000.00		
311	Pumping Equipment	5,000.00		0
320	Water Treatment Equipment			0
321	Water Treatment Plants			
322	Solution Chemical Feeders			
330	Distribution Reservoirs and Standpipes			
331	Storage Tanks			
332	Pressure Tanks			
331	Transmission and Distribution Mains			
333	Services			
334	Meters and Meter Installations			
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
340.1	Computers & Software			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	<b>TOTALS</b>	<b>23,600.00</b>		<b>23,600.00</b>

This amount goes on the Comparative Statement of Income and Expense Acct. N

COMPANY NAME

JAKES CORNER WATER SYSTEM

## BALANCE SHEET

Acct No.	ASSETS	BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	<b>CURRENT AND ACCRUED ASSETS</b>		
131	Cash	\$175.00	\$ 55.00
134	Working Funds		
135	Temporary Cash Investments	685.00	120.00
141	Customer Accounts Receivable		
146	Notes/Receivables from Associated Companies		
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets		
	<b>TOTAL CURRENT AND ACCRUED ASSETS</b>	<b>\$ 860.00</b>	<b>\$ 175.00</b>
	<b>FIXED ASSETS</b>		
101	Utility Plant in Service	\$ 23,600.00	\$ 23,000.00
103	Property Held for Future Use		
105	Construction Work in Progress		
108	Accumulated Depreciation – Utility Plant		
121	Non-Utility Property		
122	Accumulated Depreciation – Non Utility		
	<b>TOTAL FIXED ASSETS</b>	<b>\$ 23,600.00</b>	<b>\$ 23,600.00</b>
	<b>TOTAL ASSETS</b>	<b>\$ 24,460.00</b>	<b>\$ 23,775.00</b>

NOTE: The Assets on this page should be equal to Total Liabilities and Capital on the following page.

COMPANY NAME JAKES CORNER WATER SYSTEM

BALANCE SHEET (CONTINUED)

Acct. No.		BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
<b>LIABILITIES</b>			
<b>CURRENT LIABILITIES</b>			
231	Accounts Payable	\$0	\$0
232	Notes Payable (Current Portion)		
234	Notes/Accounts Payable to Associated Companies		
235	Customer Deposits	50.00	50.00
236	Accrued Taxes		
237	Accrued Interest		
241	Miscellaneous Current and Accrued Liabilities		
	<b>TOTAL CURRENT LIABILITIES</b>	\$ 50.00	\$50.00
<b>LONG-TERM DEBT (Over 12 Months)</b>			
224	Long-Term Notes and Bonds	\$0	\$0
<b>DEFERRED CREDITS</b>			
251	Unamortized Premium on Debt	\$0	\$0
252	Advances in Aid of Construction		
255	Accumulated Deferred Investment Tax Credits		
271	Contributions in Aid of Construction		
272	Less: Amortization of Contributions		
281	Accumulated Deferred Income Tax		
	<b>TOTAL DEFERRED CREDITS</b>	\$0	\$0
	<b>TOTAL LIABILITIES</b>	\$50.00	\$50.00
<b>CAPITAL ACCOUNTS</b>			
201	Common Stock Issued	\$0	\$0
211	Paid in Capital in Excess of Par Value	24,410.00	23,725.00
215	Retained Earnings		
218	Proprietary Capital (Sole Props and Partnerships)		
	<b>TOTAL CAPITAL</b>	\$24,460.00	\$23,775.00
	<b>TOTAL LIABILITIES AND CAPITAL</b>	\$24,460.00	\$23,775.00

COMPANY NAME **JAKES CORNER WATER SYSTEM**

**COMPARATIVE STATEMENT OF INCOME AND EXPENSE**

Acct. No.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
461	Metered Water Revenue	\$1186.00	\$2955.79
460	Unmetered Water Revenue		
474	Other Water Revenues		
	<b>TOTAL REVENUES</b>	<b>\$1186.00</b>	<b>\$2955.79</b>
	<b>OPERATING EXPENSES</b>		
601	Salaries and Wages	\$0	\$1200
610	Purchased Water	\$501.83	\$429.29
615	Purchased Power		
618	Chemicals		
620	Repairs and Maintenance	\$	\$500.00
621	Office Supplies and Expense		\$10.00
630	Outside Services		
635	Water Testing		\$1425.00
641	Rents		\$2000.00
650	Transportation Expenses		
657	Insurance – General Liability		
659	Insurance - Health and Life		
666	Regulatory Commission Expense – Rate Case		
675	Miscellaneous Expense		
403	Depreciation Expense		
408	Taxes Other Than Income	\$83.02	\$111.77
408.11	Property Taxes		\$140.77
409	Income Tax		
	<b>TOTAL OPERATING EXPENSES</b>	<b>\$584.85</b>	<b>\$5490.06</b>
	<b>OPERATING INCOME/(LOSS)</b>	<b>\$601.15</b>	<b>&lt; \$2014.23 &gt;</b>
	<b>OTHER INCOME/(EXPENSE)</b>		
419	Interest and Dividend Income	\$ 0	\$ 0
421	Non-Utility Income		
426	Miscellaneous Non-Utility Expenses		
427	Interest Expense		
	<b>TOTAL OTHER INCOME/(EXPENSE)</b>	<b>\$ 0</b>	<b>\$ 0</b>
	<b>NET INCOME/(LOSS)</b>	<b>\$601.15</b>	<b>&lt; \$2534.27 &gt;</b>



COMPANY NAME	<b>JAKES CORNER WATER SYSTEM</b>
Name of System:	ADEQ Public Water System Number:

**WATER COMPANY PLANT DESCRIPTION**

**WELLS**

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled
AZ 0404083	2	30	60'			

\* Arizona Department of Water Resources Identification Number

**OTHER WATER SOURCES**

Name or Description	Capacity (!!DID)	Gallons Purchased or (obtained (in thousands)
N/A		
N/A		

BOOSTER PUMPS		FIRE HYDRANTS	
Horsepower	Quantity	Quantity Standard	Quantity) Other
N/A			
N/A			

STORAGE TANKS		PRESSURE TANKS	
Capacity	Quantity	Capacity	Quantity
		5,000	1

*Note: If you are filing for more than one system, please provide separate sheets for each system.*

COMPANY NAME	<b>JAKES CORNER WATER SYSTEM</b>
Name of System:	ADEQ Public Water System Number:

**WATER COMPANY PLANT DESCRIPTION (CONTINUED)**

**MAINS**

Size (in inches)	Material	Length (in feet)
2		
3		
4		
5		
6		
8		
10		
12		

**CUSTOMER METERS**

Size (in inches)	Quantity
5/8 X %	20
3/4	
1	
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Turbo 4	
Comp. 6	
Turbo 6	

For the following three items, list the utility owned assets in each category for each system.

TREATMENT EQUIPMENT:

*N/A*

STRUCTURES:

*N/A*

OTHER:

*N/A*

*Note: If you are filing for more than one system, please provide separate sheets for each system.*

COMPANY NAME:	<b>JAKES CORNER WATER SYSTEM</b>
Name of System:	ADEQ Public Water System Number:

**WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2014**

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD (Thousands)	GALLONS PUMPED (Thousands)	GALLONS PURCHASED (' Thousands)
JANUARY	19	88636		
FEBRUARY	19	79004		
MARCH	19	88729		
APRIL	19	87746		
MAY	19	88786		
JUNE	19	99124		
JULY	19	98992		
AUGUST	19	98993		
SEPTEMBER	19	78992		
OCTOBER	19	77472		
NOVEMBER	19	77581		
DECEMBER	19			
<b>TOTALS</b>		1,043,050		

What is the level of arsenic for each well on your system? 0 mg/l  
*(If more than one well, please list each separately.)*

If system has fire hydrants, what is the fire flow requirement? N/A GPM for    hrs

If system has chlorination treatment, does this treatment system chlorinate continuous?  
 Yes                       No

Is the Water Utility located in an ADWR Active Management Area (AMA)?  
 Yes                       No

Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement  
 Yes                       No

If yes, provide the GPCPD amount: \_\_\_\_\_

*Note: If you are filing for more than one system, please provide separate data sheets for each system.*

COMPANY NAME:	<b>JAKES CORNER WATER SYSTEM</b>
Name of System:	ADEQ Public Water System Number:

UTILITY SHUTOFFS / DISCONNECTS

MONTH	Termination without Notice R14-2-410.B	Termination with Notice R14-2-410.C	OTHER
JANUARY			
FEBRUARY			
MARCH			
APRIL			
MAY			
JUNE			
JULY			
AUGUST			
SEPTEMBER			
OCTOBER			
NOVEMBER			
DECEMBER			
TOTALS -----+			

OTHER (description):

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COMPANY NAME

JAKES CORNER WATER SYSTEM

YEAR ENDING 12/31/2013

**PROPERTY TAXES**

Amount of actual property taxes paid during Calendar Year 2013 was: \$ 0.0 + --

Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.

If no property taxes paid, explain why ----- 1-----

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VERIFICATION  
AND  
SWORN STATEMENT  
Taxes

RECEIVED  
SEP 28 2015  
ACC UTILITIES DIRECTOR

VERIFICATION

STATE OF \_\_\_\_\_  
I, THE UNDERSIGNED  
OF THE

COUNTY OF (COUNTY NAME)	GILA
NAME (OWNER OR OFFICIAL) TITLE	KACY J PARKER
COMPANY NAME	JAKE'S CORNER WATER

DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2014

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

I HEREBY ATTEST THAT ALL PROPERTY TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

I HEREBY ATTEST THAT ALL SALES TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

\_\_\_\_\_  
SIGNATURE OF OWNER OR OFFICIAL

\_\_\_\_\_  
TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS \_\_\_\_\_ DAY OF

COUNTY NAME
MONTH

(SEAL)

\_\_\_\_\_  
SIGNATURE OF NOTARY PUBLIC

MY COMMISSION EXPIRES \_\_\_\_\_

**COMPANY NAME: JAKES CORNER WATER SYSTEM YEAR ENDING 12/31/2014**

**INCOME TAXES**

For this reporting period, provide the following:

Federal Taxable Income Reported \_\_\_\_\_  
Estimated or Actual Federal Tax Liability \_\_\_\_\_

State Taxable Income Reported \_\_\_\_\_  
Estimated or Actual State Tax Liability \_\_\_\_\_

Amount of Grossed-Up Contributions/Advances:

Amount of Contributions/Advances \_\_\_\_\_  
Amount of Gross-Up Tax Collected \_\_\_\_\_  
Total Grossed-Up Contributions/Advances \_\_\_\_\_

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refund are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of r fund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

**CERTIFICATION**

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.

  
\_\_\_\_\_  
**SIGNATURE**

9-28-15  
\_\_\_\_\_  
**DATE**

Kacy Parker  
\_\_\_\_\_  
**PRINTED NAME**

OWNER  
\_\_\_\_\_  
**TITLE**

**VERIFICATION  
AND  
SWORN STATEMENT  
Intrastate Revenues Only**

RECEIVED  
**SEP 28 2015**

VERIFICATION

ACC UTILITIES DIRECTOR

STATE OF \_\_\_\_\_  
I, THE UNDERSIGNED  
OF THE

COUNTY OF (COUNTY NAME)	GILA
NAME (OWNER OR OFFICIAL) TITLE	KACY J PANKER owner
COMPANY NAME	JAKES Carbon Water

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION FOR THE YEAR ENDING \_\_\_\_\_

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND I DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF

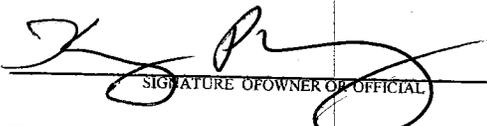
SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING CALENDAR YEAR 2013 WAS:

Arizona Intrastate Gross Operating Revenues Only (\$)	\$ 2,955,79
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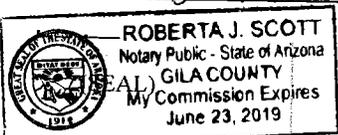
(THE AMOUNT IN BOX ABOVE INCLUDES \$ 111.77 IN SALES TAXES BILLED, OR COLLECTED)

\*\*REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)

  
SIGNATURE OF OWNER OR OFFICIAL  
\_\_\_\_\_  
TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

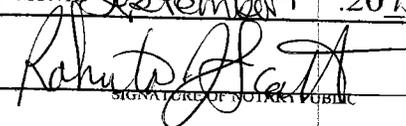
A NOTARY PUBLIC IN AND FOR THE COUNTY OF \_\_\_\_\_ OF \_\_\_\_\_ DAY OF \_\_\_\_\_ THIS \_\_\_\_\_



MY COMMISSION EXPIRES \_\_\_\_\_

June 23, 2019

COUNTY NAME	Gila
MONTH	September 2015

  
SIGNATURE OF NOTARY PUBLIC

VERIFICATION  
AND  
SWORN STATEMENT  
RESIDENTIAL REVENUE  
Intrastate Revenues Only

RECEIVED  
SEP 28 2015  
ACC UTILITIES DIRECTOR

VERIFICATION

STATE OF ARIZONA

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME)	GILA
NAME (OWNER OR OFFICIAL)	KARY J PARKER
TITLE	owner
COMPANY NAME	JAKES CORPORA WATER

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION  
FOR THE YEAR ENDING MONTH DAY YEAR

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND I DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2013 WAS:

ARIZONA INTRASTATE GROSS OPERATING REVENUES
\$ 2,955.79

THE AMOUNT IN BOX AT LEFT  
INCLUDES \$  
IN SALES TAXES BILLED, OR COLLECTED

\*RESIDENTIAL REVENUE REPORTED ON THIS PAGE  
MUST INCLUDE SALES TAXES BILLED.

*[Signature]*  
SIGNATURE OF OWNER OR OFFICIAL

TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME  
A NOTARY PUBLIC IN AND FOR THE COUNTY OF  
THIS 28th DAY OF

NOTARY PUBLIC NAME	Roberta J Scott
COUNTY NAME	Gila
MONTH	September 1, 2015

(SEAL)



ROBERTA J. SCOTT  
Notary Public - State of Arizona  
GILA COUNTY  
My Commission Expires  
June 23, 2019

MY COMMISSION EXPIRES

June 23, 2019

*[Signature]*  
SIGNATURE OF NOTARY PUBLIC