

EXHIBIT 1



Search USPS.com or Track Packages

Track & Confirm

You entered: 70081830000468864863

Status: Delivered

Your item was delivered at 12:41 pm on April 23, 2012 in HONOLULU, HI 96813. Additional information for this item is stored in files offline.

You may request that the additional information be retrieved from the archives, and that we send you an e-mail when this retrieval is complete. Requests to retrieve additional information are generally processed momentarily.

I would like to receive notification on this request

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End Footer

7008 1830 0004 6886 4863

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT <small>(Domestic Mail Only; No Insurance Coverage Provided)</small>	
For delivery information visit our website at www.usps.com .	
OFFICIAL USE	
Postage \$	Postmark <i>Honolulu 41 96813</i> <i>4-17-12</i>
Certified Fee	
Return Receipt Fee <small>(Endorsement Required)</small>	
Restricted Delivery Fee <small>(Endorsement Required)</small>	
Total Postage & Fees	
Sent To <i>Fill Neepamine</i> <i>Deputy Attorney Gen</i> <i>465 South King St</i>	
PS Form 3800, August 2006 See Reverse for Instructions	

<p>SENDER: COMPLETE THIS SECTION</p> <p>1. Article Addressed to: <i>Fill Neepamine</i> <i>Deputy Attorney Gen</i> <i>Honolulu 4196813</i></p> <p>2. Article Number <i>(Transfer from service lat)</i> 7008 1830 0004 6886 4863</p>	<p>COMPLETE THIS SECTION ON DELIVERY</p> <p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> <i>D. Sute</i> <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>D. Sute</i> C. Date of Delivery <i>4/23/12</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p> <p>3. Service Type <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>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
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102595-02-M-1540
Domestic Return Receipt
PS Form 3811, February 2004