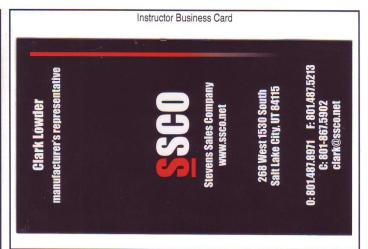


Training Verification

Job Number	Job Name				Date of Instruction	
9	DSC	- Holl	and CC		4-25-12	
Company Repr	resented					
	54	eiens	Sales	Ce	mpany	
	Instructor Name Instructor Phone #					
Clark	Low	ler	801-48	37-	-8971	
Item(s) Trained		FI - 2	Electricy	1	retering Cab	
Videographer Steve Johnson						
Training Session 352		Number of Vi	deo Tapes Used	To	otal Hours of Instruction	



Name	Company	Department	Phone
Jeff Hout	Dixe State College	Electrical	652-7560
per Karock	Dixie State College DIXIE STATE COLLEGE	ELECTRICAL	652-7560
COOPER POV	VER SYSTEMS		
C. S. (Clark) Lowd	er		
Fax: 801/487-5213	uth 84115 • 801/487-8971		
Mail: P.O. Box 6559 Salt Lake City, UT	96 84165-0596		