

7012 2210 0000 5371 0140

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

For delivery information visit our website at www.usps.com®

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	

NOV 11/22/19
Postmark Here

Sent To Mr. Gary R. Heminger, CEO, Chairman
MPLX LP
Street, Apt. No. or PO Box No. 200 E. Hardin St.
City, State, ZIP Findlay, OH 45840-4963
CAA-08-2020-0002

PS Form 3800, August 2006 See Reverse for Instructions

SEN

1. Complete items 1, 2, and 3.
2. Print your name and address on the reverse so that we can return the card to you.
3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Mr. Gary R. Heminger, CEO, Chairman
MPLX LP
200 E. Hardin St. NOV 2 5 2019
Findlay, OH 45840-4963
CAA-08-2020-0002 P

2. Article Number (Transfer from service label)
7012 2210 0000 5371 0140

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Insured Mail
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery
 Restricted Delivery

A. Signature
 Dana G. Babcock
 Agent
 Addressee

B. Received by (Printed Name)
Dana G. Babcock

C. Date of Delivery
12/2/2019

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No
 539 S. Main St
 45840

9590 9402 3365 7227 3675 82

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt