

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mr. Cameron S. Delong  
Registered Agent For: Paragon Firstronic  
111 Lyon Street NW, Suite 900  
Grand Rapids, Michigan 49503

*EPCRA -05-2008-0022*

2. Article Number  
(Transfer from service label)

7001 0320 0006 0293 3224

PS Form 3811, March 2001

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) *Ref Strickus* B. Date of Delivery *8/8/08*

C. Signature *[Signature]* ☐ Agent  
☒ Addressee

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☒ No

3. Service Type *AUG 08 2008*  
☒ Certified Mail ☐ Express Mail  
☐ Registered ☒ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

Domestic Return Receipt

102595-01-M-1424