

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Received by (Please Print Clearly) <u>Amey Hubbard</u> B. Date of Delivery <u>MAR 04 2011</u>	
	C. Signature <u>Amey Hubbard</u> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
1. Article Addressed to: Mr. John J. Zevalkink Registered Agent for Columbian Distribution Services, Inc. 900 Hall Street, SW Grand Rapids, Michigan 4950		D. Is delivery address different from item 1? If YES, enter delivery address below: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. Article Number (Transfer from service label) <u>7009 1680 0000 7660 5205</u>		3. Service Type <b>USEPA REGION 3</b> <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.
PS Form 3811, March 2001 <u>SC-5J J. Entzinger</u>		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

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 2.80

Return Receipt Fee (Endorsement Required) 2.15

Restricted Delivery Fee (Endorsement Required) 0.00

Total Postage & Fees **\$ USEPA REGION 3 7.17**

Postmark Here **MAR 04 2011**

Mr. John J. Zevalkink  
 Registered Agent for  
 Columbian Distribution Services, Inc.  
 900 Hall Street, SW  
 Grand Rapids, Michigan 4950

PS Form 3800, August 2008